

WASHINGTON MEDICAL ANNALS

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DISTRICT OF COLUMBIA

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INDEX.

Acidosis	63
Address of President	1
Alopecia, post influenzal	56
Amendments to constitution	15
Appropriations	16, 55, 56, 57, 60
Ashford, B. K.	15, 16
Atkinson, F. V.	56
Atkinson, W. H.	60
Avery, F. S.	42
Aviation, studies in	46
Bernton, H. S.	57, 58, 62
Biliary passages, diseases of	61
Borden, W. C.	59
Bovee, J. W.	31
Bricker, Sacks	59
Bryan, J. H.	41
Burton, H. R.	54, 57
Carmichael, R. B.	57
Carr, W. P.	13, 14, 54, 59, 85
Cases and specimens:	
Amputation external genitals	16
Bladder, disease of	16
Burns, extensive	16
Cancer of liver	16
Cataract, eczema and asthma	57
Congenital defects	59
Displacement of intestine	59
Empyema	57
Endocrinopathy	59
Epilepsy, traumatic	61
Epistaxis	56
Fecal impaction	59
Fracture clavicle	15
Fracture—dislocation humerus	61
Fracture skull	16
Gallstones	14
Goiter	16
Influenza	56
Influenza and malaria	60
Intestinal obstruction	16, 59
Myasthenia gravis	59
New growth and lung	55
Palate paralysis after influenza	56
Phlegmonous colitis	55
Pituitary tumor	56
Pleural debris	54
Pneumothorax, spontaneous	56
Pygopagus	60

Cases, continued:

Syphilis	4, 58
Tetanus	43
Clark, W. L.	57
Claytor, T. A.	42
Cole, J. T.	31
Committees:	
Attendance	14, 16, 64
Building	14, 23, 54, 55, 57, 58, 59, 60, 62, 64
Censors	23, 54, 64
Child welfare	65
Civilian hospital	64
Contagious diseases	57, 58, 61, 62, 65
Council National Defense	66
Executive	13, 14, 15, 16, 17, 23, 53, 58, 60, 64
Federation	56, 65
Gallinger memorial	13, 23, 65
History	53, 65
Hospitals	16, 17, 23, 65
Hygiene and sanitation	65
Necrology	17, 23, 54, 56, 58, 60, 66
Nurses, training	66
Press	66
Program	15, 23, 54, 64
Publications by physicians of District	23, 54, 56, 64
Schools	66
Smoker	60
Trustees	66
Tuberculosis	66
Cooke, R. R.	31
Constas, John	16
Corresponding secretary	53, 54
Council of National Defense	16
Cows' tails	61
Crowley, J. F.	58, 62

Davidson, E. Y.	77
----------------------	----

Davis, W. T.	13, 57
-------------------	--------

Deaths:

Armstrong, W. J.	23, 54
Baker, Frank	14, 23, 49
Blakistone, J. C.	23, 50, 54
Brown, C. W.	15, 23
Echols, F. S.	15, 23, 50
Glascoek, Alfred	15, 23
Grasty, T. S. D.	15, 23
Hudson, W. B.	23
Kinyoun, J. J.	51, 57
Kramer, T. B.	15, 23, 52
Miller, Thos. J.	15, 23
Poulton, W. E.	57, 68
Schaeffer, E. M.	52
Sowers, Z. T.	68
Square, Susan J.	23, 52, 54
Turton, W. E.	15, 23
Deaver, J. B.	61
Defects of hearing and speech	60
Delegate to A. M. A.	9, 14, 53, 60

INDEX

v

Diphtheria, forms of reports	66, 67
Directory	17
Donnally, H. H.	68
Dufour, C. R.	31
Easton, C. D.	58, 62
Eczema	63
Editorial	18, 63
Electrodermic methods in surgery	57
Eppard, G. J.	15, 54
Ewen, Clarence	68
Ferguson, C. E.	41, 59
Finley, C. B.	68
Fisher, H. C.	15
Foley, T. M.	60
Foote, J. A.	31
Foreign citizens	13
Foster, N. B.	23
Franzoni, C. W.	17, 53, 62
Fry, H. D.	68
Gallinger, Senator	13
Gannon, J. A.	15
Gapen, Nelson	58, 62, 68
Gibson Surg. Inst. Co.	13
Groover, T. A.	56
Hadley, H. G.	62
Hand, Preservation of after shot injury	60
Hazen, H. H.	15
Heger, Anthony	31
Hickling, D. P.	43
Histopathology and treatment of war wounds.....	16
Home for Medical Society	6, 73, 75, 77, 81
Horrigan, D. E.	62
Hough, W. H.	6, 56
Influenza, pulmonary sequelae	61
Intravenous vaccine (proteins) therapy	35
Jack, W. A., Jr.	16
Kelley, J. T.	31
Knud-Hansen, Knud	58, 62
Kober, G. M.	42, 55
Labor, mechanism of	59
Lamb, D. S.	61
Lamb, R. S.	59
LeComte, R. M.	4
Lind, J. E.	55
Little, J. W.	68

McCauley, F. J.	31
McCue, J. D.	58, 62
McKaig, J. F.	31
Macatee, H. C.	17, 59
Marriages	68
Martin, T. C.	13, 59
Meetings, notices of	54, 55
Members, list of	87
Membership, applicants	15, 54, 58
elected to	14, 54, 58
resignation from	15, 17
Miller, J. F.	13
Monsters	61
Moran, J. F.	59
Morgan, E. L.	58, 62
Morgan, W. G.	17, 42, 57, 58, 77
Morris, R. T.	62
Moser, J. M.	31, 60
Motter, M. G.	55
Narcotic law	54, 55, 56, 58, 60
National Waste Reclamation Council	16
Nervous disorders in army	56
Neumann, Lester	57
Nichols, J. B.	35, 42, 55
Nolan, F. M.	14
Norris, L. B.	58, 62
Officers elected	17
Owen, W. O.	6
Personal notes	31
Pfeiffer, J. A. P.	15, 54
Pneumonia, new conceptions	57
Proceedings of the Medical Society	13, 53
Proteins, disturbances caused by	57
Publications of physicians	24, 69
Railway spine	55
Red Cross Motor Service	61
Reeves, W. P.	61
Rench, V. B.	56
Reviews	27
Richardson, C. W.	58, 60
Richmond, J. M.	62
Rogers, J. D.	16
Ross, Mrs.	56
Rowson, G. H.	62
Roy, P. S.	1, 9, 42, 45, 55, 59
Savage, L. S.	56
Saxton, R. L.	58, 62
Schoenfeld, H. H.	62
Secretary A. M. A.	62
Seibert, E. G.	46
Selby, J. H.	60

Shands, A. R.	17
Simpson, C. A.	56
Smoker	60, 61
Societies:	
American Medical Association	62
Casualty Hospital Medical	19
Clinical	19
Clinico-Pathological	19
El Paso Medical	62
Emergency Hospital Club	19
Freedmen's Hospital Medical	19
Georgetown Clinical	20
Georgetown University Medical	20
G. W. University Medical	20
Hippocrates and Galen Society	20
Medical History Club	20
Medical and Surgical Society	20
Medical Jurisprudence	21
Mental Hygiene	21
Ophthalmologists and Otologists	21
Social Hygiene	21
Therapeutic Society	21
Walter Reed Medical	21
Washington Academy of Sciences	17
Washington Obstetric and Gynecological	22
Washington Psychoanalytic	22
Washington Society Nervous and Mental Diseases.....	22, 64
Washington Surgical	22
Women's Medical	22
Special committee reports	53
Station, changes of army officers	31
Stone, I. S.	31
Stuart, D. D. V.	54, 58
Syphilis, intensive treatment	15
 Tayler-Jones, Louise	56
Tewksbury, W. D.	61
Thomas, Ada R.	17
Thomson, L. B.	59
Thornley, R. A.	58, 62
Todd, S. J.	31
Treasurer	14, 16, 55, 56, 59, 62
Tuberculosis, clinical study	57
Turnbull, J. A.	57
 Verbrycke, J. R., Jr.	16, 17, 59
 Wall, Max	17
Wallis, J. F.	63
White, C. S.	61
Williams, Geoffrey	58, 62
Williams, T. A.	56
Woodward & Lothrop	13
 Yarnall, J. H.	14
Yates, Frederick	42

WASHINGTON MEDICAL ANNALS

ANNUAL ADDRESS TO THE MEDICAL SOCIETY OF
THE DISTRICT OF COLUMBIA, DECEMBER 11, 1918.

By PHILIP S. ROY, M. D., President.

THE PRESIDENT-ELECT AND FELLOW-MEMBERS:

Our Society this year has witnessed the closing of a war unequaled in magnitude in the recorded history of the world. Its history is yet to be written, but the records will show that the members of this Society have fully met their patriotic duty; while our American Medical Association shows a service flag of thirty-four thousand. One hundred and forty-five members of our Society entered the Army and Navy, and many of those who remained at home performed valuable and arduous work in the examination of the soldiers before they were sent to camp. In the arena of war the medical profession has fully maintained the valor ascribed by Homer to the two sons of Aesculapius in the Trojan war. The valor of the physician is modest—not the press-agent variety. I would suggest that at some time the Historical Committee of the Society be instructed to furnish such report as it may deem adequate of services performed by the members of our Society during this war.

In all ages when men have gone to war they have tried to justify their cause. Shakespeare gives an illustration in "Richard the Second." When Norfolk enters the arena to fight with Lancaster, King Richard immediately challenges the justice of his cause: "Marshal, demand of yonder champion the cause of his arrival here in arms: Ask him his name, and orderly proceed to swear him in the justice of his cause." Our cause was humanity and democracy, but civil democracy will but partially triumph if religious democracy do not prevail.

Religious democracy is not expressed in religious organizations whose head chooses men from the different walks of life and elevates them to ecclesiastical position to do his bidding. Christian democracy means the interpreting by each man for himself his religious guide.

Thomas Jefferson expresses the belief that the teachings of Christ are so simple that anyone can understand them. In a letter to John Adams, from Monticello, in 1814, he writes: "The Christian priesthood finding the doctrines of Christ levelled to every understanding, and too plain to need explanation, saw in the mysticism of Plato materials with which they might build up an artificial system, which might, from its indistinctness admit everlasting controversy, giving employment for their order, and introducing it to profit, power and pre-eminence. The doctrines which flowed from the lips of Jesus himself are within the comprehension of a child, but thousands of volumes have not yet explained the platoisms engrafted on them; and for the obvious reason that nonsense cannot be explained."

Writing from Washington in 1803 to Benjamin Rush, he says again: "Ecclesiastics have frittered the teachings of Christ into subtleties and obscured them with jargon." Thomas Jefferson was a Unitarian, but he says Christ left a system of morals the most perfect and sublime that has ever been taught by man.

We find in Germany the followers of Luther and the followers of the pope of Rome equally barbaric in their warfare, and they had excellent instructors, for in the time of Luther when peasants tried to rid themselves of the cruel oppression of the nobility, Luther advised the authorities "to cast away all scruple and stab and kill and strangle without mercy." History records in all ages that the popes were masters in devising cruelty against those who did not submit to their authority, accept their means of grace and believe in their doctrines. Europe's religion has been largely "Devotion's every grace except the heart." The pompous strain, the vaulted roof, the stained-glass window, the image and the relic have made the religious teaching of Europe.

Our President says there must be a league of nations. To me this is absolutely impossible without an adjustment of the religious differences among the so-called Christian nations; because there can be no league of nations without a brotherhood, and there can be no brotherhood among the Christian nations of the world unless there is reasonable respect for all honest religious thought. A religious brotherhood among Christian nations must mean that, regardless of the different forms of religious worship, all must be harmoniously bound together through their head—Christ—none claiming spiritual superiority in religious matters. This is certainly the feeling of three-fourths of the intelligent Christians of the world, and I believe there is no religious power given to man save through the life he leads; and this we may call religious influence.

Italy, France and Belgium must be strong enough to demand that their religious teachers change their attitude toward the great

democratic religious organizations of the world, before it will be possible for us to have a true league of nations.

I believe every American is prouder today of his country than ever before, and America stands pre-eminently for two things—democracy in civil government and democracy in religion.

All the religious organizations of Europe have always been the friends and supporters of classes. They have taught the masses that God has intended them to be beneath kings and princes—temporal princes and ecclesiastical princes.

It is a pleasure to learn from the Chairman of our Building Committee that there is a growing interest in the Society in our project to have a permanent home. He informs me that he believes in the coming year the remainder of the purchase money on our lot will be paid. With this done, there certainly can be no hardship upon any member of this Society to aid in furnishing a sufficient sum for placing upon that lot a suitable assembly hall. It will be a matter of great pride and pleasure to us to have a permanent home. This is the most important work the Society has before it for the next few years.

I regret very much that our committees on Hygiene and Sanitation, Schools, Tuberculosis, and Contagious Diseases have been unable to report. Each year these committees should do such constructive work for the Society that their reports might be published in the newspapers of Washington. Our Society is certainly not filling the prominent place it should, in community work. Its strength should be so felt that it would be constantly called upon by the authorities of Washington in public matters. One of the committees this year—the Children's Welfare Committee—did a vast amount of important work, and the Society is greatly indebted to it. The members of the committee gave hours of their time to examining children, the request having come from the Children's Welfare Bureau, one of the branches of the Council of National Defense. I hope in the coming year that the Committee on Attendance and the Federation Committee will devise some means that will insure a larger attendance at our weekly meetings. Of course this year our attendance has been greatly reduced on account of the large number serving in the war.

I have always felt that the Internal Revenue interpretation of Section 6 of the Opium and Narcotic laws does great injustice to the public and gives the physician much unnecessary trouble. This section reads: "The preparations containing not more than two grains of opium or one-fourth of a grain of morphia, one-eighth of a grain of heroin or one grain of codine to one ounce, shall be exempt from the regulations of this act." This has been construed by the Internal Revenue to mean only proprietary and

patent medicines; physicians' prescriptions with such quantities cannot be renewed. This seems so grossly unjust that if the matter were brought to the attention of Congress by the American Medical Association, such change in the wording of the act as is necessary to include physicians' prescriptions might be enacted. I, therefore, recommend that our delegate to the American Medical Association at its next annual meeting be instructed to present this matter in such way as he may deem best to the House of Delegates for their action.

The duties of the Corresponding Secretary and the Recording Secretary of this Society cause much duplication in work. I recommend that the Society have one Secretary, whose salary shall be five hundred dollars a year, with an additional hundred for clerical expense.

The Program Committee, the Chairman of which by virtue of his office is also a member of the Executive Committee, should arrange all programs, and send them out signed by the Chairman of the Program Committee. At present the Constitution directs that the Corresponding Secretary shall sign the programs.

For many reasons the Committee on Necrology is unsatisfactory—through no fault of the Committee—and I would suggest that the Medical Society have an official card expressing the regret of the Society, upon the death of a member, which card could be sent to the family. If the Society deems further recognition necessary, it can so determine from time to time.

I value far more than I can express the honor of having been President of this Society, and I ask God's blessing upon its work. May it redound to His glory, the glory of our profession and the welfare of mankind.

CASE OF ACQUIRED SYPHILIS IN BOY OF 13 YEARS.*

By R. M. LE COMTE, M. D.,

Washington, D. C.

E. T., Male, white, aged 13 years. About August 12, 1918, he and two companions of about the same age had intercourse with a public woman of about nineteen years, who was plying her trade in the vicinity of Takoma Park. About twenty-one days later he noticed a sore on his penis at the junction of the collum with the corona glandis. For fear that his escapade would be detected, he concealed his condition from his father, but it was discovered accidentally about a week later. His father took him

* Reported to the Medical Society November 6, 1918.

to the family physician, Dr. W. E. Whitson, by whom he was referred to me for dark-field examination of the sore.

The lesion was located on the right side of the organ, partly on the glans and partly on the prepuce. It was about 1.0 cm. in diameter, circular, slightly raised, on an indurated base, ulcerated, and covered with a grayish material on the part situated on the glans, while the remainder presented a bleeding surface. There was moderate oedema of the glans penis and prepuce, but no pain except upon manipulation.

The *Spirochaeta pallida* was demonstrated in the exudate from the lesion by means of the dark-field microscope on September 12, twelve days after the lesion was noticed, and approximately thirty-three days after exposure. On the following day a cast, from which a wax model was made, was taken by Captain J. F. Wallis, of the Army Medical Museum. There was no other skin lesion discoverable nor any pharyngitis; the epitrochlear, inguinal and post-cervical lymph-nodes were enlarged.

Local treatment consisted of cleanliness, and calomel as a dusting powder. Daily inunctions of an ointment of about 8.0 per cent calomel in a lanolin and vaselin base were begun at once, and he was given 0.2 gram of arsphenamin on September 15 and 0.4 gram on the 18th, by the intravenous route. The sore had completely healed by Sept. 20, five days after the beginning of general treatment.

The complement fixation test on the blood serum with cholesterinized human heart antigen was negative at the time the diagnosis was made and has been negative on two occasions since.

Dr. A. B. Little, who examined the two other boys who were with my case at the time of infection, tells me that they have both contracted gonorrhoea, but that neither has shown signs of syphilis to date.

I have reported this case to the Society because of the relative rarity of penile chancres acquired by intercourse in boys so young. My first inclination was to think of infection by a sexual pervert, but judicious questioning showed that he had no knowledge of such acts, and he persisted in his statement that he had had normal intercourse with the woman. It brings to mind, too, the probability that we are facing a more widespread prevalence of syphilis, owing to war and housing conditions, mentioned by Dr. Hazen in an essay read to this Society last year. My own experience is that more cases of infection in young individuals are occurring now than formerly, there having been three cases of acquired syphilis in males under twenty years of age in my private practice during the past year, while at the Washington Asylum Hospital the ratio of girls sent in from various sources on account of this disease has been greater than in former years.

COL. W. O. OWEN, commenting on the wax model exhibited in illustration of Dr. LeComte's case and which had been made at the Army Medical Museum, said that the facilities of the Museum were at the disposal of members of the Society; he would be most happy to have members come to see the interesting material accumulated by the Museum staff. An item of exceptional interest was the motion picture department. There was a wealth of pathological material ready for anyone who wished to make a study of it.

DR. W. H. HOUGH thought Dr. LeComte's case most interesting. Juvenile syphilitics, however, are not excessively rare; he had seen a case of acquired syphilis in a boy 12 years old, but the youngest case in his experience was that of a six-months' old child with a typical penile chancre contracted from a nurse girl; this baby exhibited secondary eruptions. Dr. Hazen's paper and the method advocated were of great interest. It was truly most important to get full therapeutic effects as early as possible in the treatment of syphilis; and intensive treatment always is in order, but one must watch very carefully for signs of variability of tolerance. Some patients do not take arsphenamine well, and every case must be watched. He cited the case of a man who had a very severe reaction after one dose of arsphenamine, but who, having later developed meningeal signs demanding quick action, cleared up very well under intensive intravenous injections.

THE NEW BUILDING.

The progress made in the building project challenges the sympathetic coöperation of each member of the Society. On January 15th another payment of \$3,750.00 was made on the building site, making a total payment of \$11,761.75. A third and final note amounting to \$3,750.00, is still outstanding. Toward the payment of this note the treasurer has in hand, in cash and Liberty Bonds, \$1,393.51. The Building Committee has undertaken to pay the final note at an early date, and the committee urges each subscriber to the Building Fund to send to the treasurer of the Society a check in payment in full of his or her subscription. As soon as the building site is cleared of indebtedness the corner stone of our new home will be laid. To an active interest in the new home the Society summons each member.

Contributions to the Building Fund have been received from the following named members of the Society:

Acker, George N.
Atkinson, Wade H.
Avery, F. Scott

Bain, Seneca B.
Balloch, Edward A.
Barnes, Noble P.

- Barnhart, Grant S.
Barton, Wilfred M.
Battles, Samuel L.
Boswell, Archie W.
Bovée, J. Wesley
Braden, Frank W.
Brandenburg, Wilbur H. R.
Bryan, Joseph H.
Burch, Edward W.
Burke, John W.
Carr, William B.
Carr, William P.
Carmichael, Randolph B.
Chipman, Cline N.
Claytor, Thomas A.
Coale, Edith S.
Conklin, Coursen B.
Conklin, Rush W.
Constas, John
Copeland, Edgar P.
Cuthbert, Middleton F.
Davidson, Edward Y.
Dixon, Henry M.
Dollman, Clarence M.
Ellyson, Robert M.
Erving, Emma L.
Finley, Clara Bliss
Fisher, Raymond A.
Folkmar, Elnora C.
Foote, John A.
Foye, A. Frances
Franklin, Edmund T. M.
Frischkorn, Robert W.
Gannon, James A.
Garnett, A. Y. P.
Garrison, Fielding H.
Gibson, Frank E.
Gill, William T.
Gray, Augustus C.
Groover, Thomas A.
Gunning, Edward J.
Gwynn, William C.
Hagner, Francis R.
Hammett, Charles M.
Hardin, Bernard L.
Henning, Carl
Heitmuller, George H.
Higgins, Daniel W.
Hilton, Samuel L.
Holden, Raymond T.
Holmes, Mary
Hooe, A. Barnes
Hooe, R. Arthur
Hough, William H.
Howard, Leland O.
Huntington, William H.
Hurt, Harry
Hyde, Charles W.
Hynson, Lawrence M.
Jack, William A., Jr.
Jackson, Virgil B.
Jaeger, Henry W.
Johnson, J. Taber
Johnson, Loren B. T.
Johnson, Louis A.
Johnson, Paul B. A.
Karpeles, Simon R.
Kearney, Henry W.
Kelley, J. Thomas
Kerr, Henry H.
Key, Sothoron
Kober, George M.
Lamb, Robert S.
Lee, Thomas S.
Leech, D. Olin
Leech, Frank
Lemon, Hanson T. A.
Lewis, Duff G.
Lewis, Harry S.
Lindsay, Janvier W.
Lockett, L. Fleet
McCarthy, Joseph J.
McLaughlin, Thomas N.
Macatee, Henry C.
Mackall, Louis
Magee, George H.
Magee, M. D'Arcy
Martin, Thos. Chas.
Martyn, Herbert E.
Mason, Robert F.
Mason, William B.
Masterson, William L.

Merrill, Walter H.	Russell, Murray A.
Miller, G. Brown	Savage, Linnaeus S.
Miner, Francis H.	Schreiber, H. R.
Mistretta, Ferdinand H.	Shands, Aurelius R.
Morgan, Edwin L.	Shute, D. Kerfoot
Morgan, James D.	Simpson, C. Augustus
Morgan, William Gerry	Simpson, J. Crayke
Moulden, William R.	Skinner, J. O.
Muncaster, Steuart B.	Snyder, Arthur A.
Mundell, Joseph J.	Sprigg, William M.
Neuman, Lester	Stavely, Albert L.
Nevitt, J. Ramsay	Stewart, John W.
Newgarden, George J.	Stone, Isaac S.
Nichols, John B.	Stoutenburgh, John A.
O'Malley, Mary	Talbott, John A.
Ong, Harry A.	Taylor, Eugene A.
Owen, William O.	Taylor, Lewis H.
Owens, S. Logan	Tewksbury, William D.
Patten, William F.	Thomas, Ada R.
Perkins, W. Robert	Thomas, William J. G.
Pfender, Chas. A.	Thompson, J. Lawn
Poole, Thomas A.	Trimble, Robert S.
Prentiss, D. Webster	Valentine, Aloysius W.
Price, Malvern H.	Vaughan, George Tully
Randolph, Buckner M.	Verbrycke, J. Russell, Jr.
Reede, Edward Hiram	Walker, R. R.
Reeves, William P.	Walter, William F.
Richardson, Chas. W.	Warren, George W.
Richardson, J. J.	White, Chas. Stanley
Rives, William C.	Wilkinson, Oscar
Rogers, Joseph D.	Wood, George W.
Roy, Philip S.	Woodward, William C.
Ruffin, Sterling	Yates, Frederick
Rule, Amy J.	Young, William G.

Since the above list was typed contributions have been received from :

Fowler, Henry A.	Mitchell, J. Ernest
Kaufman, Harry M.	Riggles, J. Lewis

REPORT TO THE MEDICAL SOCIETY OF THE
DISTRICT OF COLUMBIA,

By DR. PHILIP S. ROY,

*Delegate to the American Medical Association,
Chicago, 1918.*

After so many delightful trips with Dr. G. Wythe Cook to the meetings of the American Medical Association, it was with much regret that I learned from him that he could not attend the Chicago meeting. Dr. Cook transferred to me the honor of representing the Society in the House of Delegates.

The Society instructed me to present two matters to the House of Delegates, and I herein present the action of that body. Both of the matters were referred by the House to the Committee on Hygiene and Public Health, and it reported as follows:

"The committee had referred to it a resolution by Dr. Roy, representing the Medical Society of the District of Columbia, which reads:

"THE MEDICAL SOCIETY OF THE DISTRICT OF COLUMBIA.

"At a meeting held May 29, 1918, the following report was received and the resolutions therein adopted:

"Your Committee on Nursing begs leave to submit the following report:

"In view of the present inadequate supply of trained nurses and the great and increasing demand for them both for war work and in civil life; and in view of the fact that many persons in moderate circumstances, or on fixed salaries, with the present high cost of living, are unable to afford the services of a registered nurse when ill; and in view of the fact that the present system of training and registering nurses seems to many members of our profession to have serious defects that may be remediable, your committee recommend the following resolutions:

"1. *Resolved*, That our delegate to the American Medical Association be instructed to ask for the appointment by that body of a committee to consider the whole question of training and registering nurses, with special reference to standardizing and simplifying the curriculum and requirements and the advisability of establishing a grade of practical nurses who, with a lower preliminary educational requirement and a much shorter course of training may be registered as attendants or practical nurses, and who shall receive a smaller compensation than the graduate nurse; such attendants or practical nurses to be used especially for chronic and convalescent cases and others not

requiring the highest nursing skill, thereby relieving many graduate nurses for war work and critical cases in civil practice.

"2. We also recommend that our delegate to the American Medical Association be furnished with a copy of this preamble and resolutions for use in the House of Delegates of the A. M. A., and instructed to urge prompt action with such arguments as he deems advisable.

"W. P. Carr, G. Wythe Cook, I. S. Stone, J. B. Nichols, J. A. Gannon, N. P. Barnes, Frank Leech, M. F. Cuthbert, P. S. Roy, G. N. Acker, C. S. White, E. Y. Davidson, *Committee.*"

REPORT OF THE A. M. A. COMMITTEE.

Your committee desires to endorse not only the needs as expressed in the resolution, but also the necessity for the enlargement of all civilian training schools and necessary propaganda to secure a sufficient number of pupils for these. It recommends the adoption of the resolution and the appointment of a committee as suggested.

J. W. SCHERESCHEWSKY, U. S. P. H. S.

H. P. RITCHIE, Minnesota.

FREDERIC E. SONDERN, New York.

C. D. SELBY, Ohio.

J. R. MORRELL, Utah.

Dr. Henri P. Linsz, West Virginia, moved the adoption of the resolution. Motion seconded by Dr. E. J. Goodwin, Missouri.

After discussion the Reference Committee substituted for the final paragraph of its report, the following:

"Your Committee desires to endorse not only the needs as expressed in the resolution, but also the necessity for the enlargement of all civilian training schools and necessary propaganda to secure a sufficient number of pupils for these. It recommends the adoption of the principle of the resolution and that the resolution be referred by the House of Delegates to the Council on Health and Public Instruction with the following instructions:

"1. That the Council on Health and Public Instruction appoint a subcommittee to consider this matter.

"2. That this Committee consider especially the needs of the civic population with regard to nursing.

"3. That this Subcommittee coöperate and advise existing nursing associations and other agencies concerned in this matter."

Whereupon the motion to adopt the report as amended by the Reference Committee was put and carried.

The Committee on Hygiene and Public Health then considered the second resolution reported by the Medical Society of the District of Columbia, which was adopted by the Society at a meeting of May 23, 1918, and reading as follows:

"WHEREAS, The work of the American Red Cross is largely medical in character, and

"WHEREAS, Modern medicine is largely dependent for continued progress on the use of animals for experimentation and in the course of treatment of disease, and

"WHEREAS, The War Council of the American Red Cross, by reason of pressure brought to bear by certain misguided people ignorant of medical matters, has seen fit to issue the statement that it will not take a position either for or against the question of animal experimentation, and further has issued the statement that no money is to be taken from the General Red Cross Fund for this purpose; therefore, be it

"*Resolved*, That the Medical Society of the District of Columbia vigorously protest against such action by the Red Cross and its attitude of passive compliance with such demands concerning purely medical matters, and further be it

"*Resolved*, That the Society state its belief that such persons who endeavor to arrest any aid that the medical profession is giving to our soldiers constitute a dangerous class giving aid to the enemy."

"The A. M. A. Committee reported:

"Your committee desires to fully endorse the sentiment of the resolution as undoubtedly in the best interests of humanity and medical progress.

"As the Councilors of the American Red Cross have, however, found it expedient to act as they have, and we have the assurance that ample funds have been provided for essential research and no restrictions exist for the proper conduct of the work, your committee recommends that these resolutions be not adopted, on account of any possible embarrassment to the Red Cross they might cause."

Dr. P. S. Roy, District of Columbia, moved as an amendment that the House of Delegates strongly endorse the use of animal experimentation for saving the lives of our soldiers, and proclaimed that all who are opposed to such animal experimentation belong to a dangerous class giving aid to the enemy. Dr. Roy's motion was seconded by Dr. G. F. Cott, New York.

Motion made by Dr. M. L. Graves to lay the motion on the table. Dr. Graves' motion was seconded and carried.

It was then moved that the report as amended be adopted as a whole. This motion was seconded and carried.

Dr. Southgate Leigh, Virginia, presented the following resolution:

"In order that the tabling of the resolution offered by Dr. Roy in regard to animal experimentation shall not be misconstrued by the press and others, it is moved that the Reference Committee

on Hygiene and Public Health should be instructed to frame and present a resolution reaffirming the belief of this Association in the efficacy and necessity of animal experimentation."

The chairman stated that the committee would be so instructed.

Dr. J. W. Schereschewsky, U. S. P. H. S., chairman, presented a report from the Reference Committee on Hygiene and Public Health.

"In accordance with the direction given to the Reference Committee on Hygiene and Public Health, at the last meeting of the House of Delegates, your committee submits the following resolution concerning animal experimentation and recommends that it be adopted by the House of Delegates:

"WHEREAS, The usefulness and, indeed, the imperative need of animal experimentation has been fully established by the improvements in sanitation resulting in the striking difference in the health of troops in this as contrasted with former wars; in the practical abolition of the dreadful wound-tetanus; and in the vast improvements in the results of wound treatment; and

"WHEREAS, Further animal experimentation is absolutely necessary for the conduct of the war for the further protection of the gallant soldiers who are risking life, limb and health for our safety; and

"WHEREAS, Animal experimentation is absolutely necessary for meeting effectively the practice of the enemy in using poison gases; therefore, be it

"*Resolved*, That the House of Delegates of the American Medical Association in convention assembled at Chicago, Illinois, hereby reaffirms its belief that properly regulated animal experimentation is necessary for the sake of the public health; that the necessity for such animal experimentation is greater and more urgent at this time than ever; and that those who interfere with it in any way, thereby interfere with the conduct of the war and fail in the gratitude owing to our defenders." Adopted.

Your delegate nominated Dr. Charles W. Richardson, Lieutenant Colonel Medical Reserve Corps of the United States Army, for Third Vice President of the American Medical Association. The nomination was seconded by Dr. Southgate Leigh, of Virginia, and the election was unanimous.

P. S. Roy.

See "The New Building" page 6.

PROCEEDINGS OF THE MEDICAL SOCIETY OF THE
DISTRICT OF COLUMBIA.

WEDNESDAY, OCTOBER 2, 1918, the President, Dr. P. S. Roy, presided; about 25 members present.

Dr. D. S. Lamb, for the Committee on Publication, asked instructions with respect to the publication of the Annals. Referred to the Executive Committee with power to act.

Dr. J. B. Nichols, for the Executive Committee, reported the following recommendations:

(1) That a letter from Dr. S. S. Adams protesting against the retention in the Society of certain foreign citizens be referred to the Society, with the opinion of the Committee that any foreign citizens now members of the Society under our Constitution remain in the same status as heretofore, and that any action looking to their expulsion from the Society would have to be based upon formal charges preferred and sustained. Adopted.

(2) That the classification of Dr. W. T. Davis made by the War Committee be adhered to. Adopted.

(3) That a request from Representative Jno. F. Miller, of Washington State, for an opinion with regard to certain proposed legislation be laid on the table. So ordered.

(4) That the Secretary be instructed to acknowledge with thanks the offer of the Gibson Surgical Instrument Co. to place at the service of the Society their auditorium and to state that the Society would be pleased to avail itself of the offer should occasion arise. So ordered.

A letter of apology from Dr. Thomas Charles Martin for his failure to forward his military questionnaire was read, and, upon motion, duly adopted. Dr. Martin's questionnaire was received and his name placed in Class 8.

A letter from Woodward and Lothrop requesting the Society to endorse the use of a distinctive flag for sale by that firm as an identifying mark for physicians' automobiles on motorless Sundays was read. On motion of Dr. W. P. Carr, the Society adopted the device of a green cross on a white ground, but declined to endorse any particular flag or other emblem.

A letter from the Washington Chamber of Commerce was read, requesting the appointment of three representatives of the Society to attend a meeting to be held at the Municipal Building on October 10 to consider the question of providing a suitable memorial to the late Senator Gallinger.

The appointment of three representatives was authorized, the committee being instructed to report back to the Society. The Chair appointed Drs. W. P. Carr, D. P. Hickling and L. J. Battle.

The Chair announced the death of Dr. Frank Baker, which occurred September 30, and requested suitable action by the Committee on Necrology.

Dr. W. P. Carr reported: Gall Stone Cases seen during the past year.

WEDNESDAY, OCTOBER 9; Vice President Mary O'Malley presided. Dr. J. H. Yarnall was appointed Secretary *pro tem*. In the absence of a quorum the meeting adjourned.

"It is entered for record that a severe epidemic of influenza prevailed at the time of this meeting, the disease having invaded almost every dwelling in the city and proving very fatal because of the frequent complication of bronchopneumonia; the members of the Society were overwhelmed with the task of responding to the needs of the people."

WEDNESDAY, OCTOBER 16; the President, Dr. P. S. Roy, and the Recording Secretary met at the hour for the regular meeting, but there being no other members present, adjournment was taken until the Commissioners' order forbidding public assemblages should be rescinded.

WEDNESDAY, NOVEMBER 6; President Roy presided; about 45 members present.

The Treasurer presented his report for October showing, receipts, \$16.80; disbursed, \$91.80.

Dr. J. B. Nichols, Vice Chairman, reported that the Executive Committee had met but had transacted no business requiring reference to the Society.

Dr. P. S. Roy presented his report as delegate to House of Delegates, A. M. A. The report was received and the thanks of the Society were extended to Dr. Roy by unanimous vote. See page 9.

Dr. A. W. Boswell, for the Committee on Attendance, recommended the adoption of the following resolution:

"The military and naval services of the United States having drawn so heavily upon our membership, and the energies of those left being so severely taxed in caring for the civil population, therefore be it resolved that no further meetings other than the stated meetings be held during this session of the Society." Referred to the Executive Committee for consideration and recommendation.

Dr. Fred. M. Nolan, Georgetown University, 1915, was elected an active member.

Dr. Davidson, for the Building Committee, reported progress in securing funds to complete the purchase of the building lot.

The resignation of Col. H. C. Fisher, Medical Corps, U. S. Army, as an Associate Member, was presented.

The following applications for active membership were made and referred to the Committee of Censors:

John Arthur F. Pfeiffer, University of Maryland, 1908.

George J. Eppard, George Washington University, 1911.

Certain proposed amendments to the Constitution, recommended for adoption by the Executive Committee at the last stated meeting, being in order for consideration, Dr. Nichols explained the purpose of the proposal and moved the adoption of the amendments. After debate, which developed much opposition to the motion, the vote was taken by rising; 6 voted aye and 23 voted no; the motion was therefore declared lost.

The Chair announced the death of the following members: William E. Turton, Thomas S. D. Grasty, Thomas Miller, Jr., Thomas Best Kramer, Alfred Glascock, Francis Sherman Echols, and directed the Committee on Necrology to take appropriate action.

Dr. S. S. Adams moved that the Committee on Program be authorized to invite Col. Bailey K. Ashford, M. C., U. S. Army, to address the Society on subject agreeable to himself. So ordered.

Dr. Ralph M. LeComte reported a case of Acquired Syphilis in a Boy Thirteen Years of Age; and exhibited a wax model of the initial lesion. This case report was discussed jointly with

A paper by Dr. H. H. Hazen, entitled: More Intensive Treatment of Syphilis. Discussed by Drs. W. O. Owen and W. H. Hough. See page 4.

Col. Owen invited the attention of members to the pathological material at the Army Medical Museum and said that he would be glad to place this material and the facilities of the museum at the service of such members as may be interested.

WEDNESDAY, NOVEMBER 13; President Roy presided; about 25 members present.

The Treasurer reported additional contributions to the Building Fund.

The resignation of Col. H. C. Fisher, M. C., U. S. Army, as Associate Member, was accepted.

The Chair announced the death of Dr. Charles W. Brown and instructed the Committee on Necrology to take appropriate action.

Dr. James A. Cannon reported the following cases, and exhibited the patients in the first three named, with x-ray plates of the first and fourth:

(1) Fracture of Clavicle simulating Hysteria; diagnosis made by roentgen examination.

- (2) Amputation of External Genitalia.
 - (3) Extensive burns of thorax and right arm.
 - (4) Fracture of skull with epidural clot; operation; recovery.
- Discussed by Drs. Jack, Chipman, Roy, Rogers, Chappell, Lind, Macatee, Kober, and Gannon.

WEDNESDAY, NOVEMBER 20; President Roy presided; about 35 members present.

The Treasurer reported contributions to the Building Fund.

An invitation to appoint a committee to represent the Society in the National Waste Reclamation Council was laid on the table.

Dr. John Constas reported Two Unusual Bladder Cases. Discussed by Drs. I. S. Stone, W. P. Carr, R. A. Hooe and Constas.

Dr. Jos. D. Rogers reported two cases of Intestinal Obstruction. Discussed by Drs. Gannon, Hill, W. P. Carr and Rogers.

Dr. J. Russell Verbrycke, Jr., reported a case of Cancer of the Liver with Unusual Complications. Discussed by Drs. Roy, C. A. Simpson and Verbrycke.

WEDNESDAY, NOVEMBER 27; President Roy presided; about 35 members present.

The Treasurer reported subscriptions to the Building Fund.

An appropriation of \$6.75 was made for printing post cards for the Executive Committee.

Dr. Wm. A. Jack, Jr., reported two cases of Goiter with Aphonia. Discussed by Drs. C. W. Richardson, S. S. Adams, H. H. Bernton (Health Officer) and Jack.

Col. Bailey K. Ashford, M. C., U. S. Army, addressed the Society on the Histo-pathology and Treatment of War Wounds; an informative account of the latest fruits of research and practice in the military hospitals in France. Discussed by Drs. W. C. Borden, W. P. Carr, G. Wythe Cook, Gen. W. H. Arthur, U. S. A., and Ashford.

WEDNESDAY, DECEMBER 4; President Roy presided; about 40 members present.

The Treasurer presented his report for November, showing receipts, \$1,552.89; disbursed, \$112.80.

Dr. J. B. Nichols, for the Executive Committee, reported the following recommendations, which were adopted:

(1) That the request of the Committee on Attendance to withdraw a resolution looking to curtailment of the number of meetings of the Society be granted.

(2) That the request of the Council on Medical Education of A. M. A. for the appointment of a local committee to cooperate with that council in a survey of the hospitals of the District to

determine their availability for the proper training of interns be granted, and that the President be authorized to appoint such a committee, the number of members to be determined by him.

The Chair appointed the following as members of the committee: Drs. H. T. A. Lemon, J. Lawn Thompson, E. P. Copeland and R. Arthur Hooe.

The following were elected officers for the year 1919:

President, Wm. Gerry Morgan.

First Vice President, Ada R. Thomas.

Second Vice President, A. R. Shands.

Recording Secretary, H. C. Macatee.

Corresponding Secretary, J. Russell Verbrycke, Jr.

Treasurer, C. W. Franzoni.

The election of Dr. Franzoni was for his 45th term as Treasurer, and as a special mark of respect and esteem the unanimous ballot of the Society was cast by the Secretary, according to a resolution adopted by rising vote.

Executive Committee, for three years, A. W. Boswell, P. S. Roy and C. S. White.

Vice President of the Washington Academy of Sciences, Wm. Gerry Morgan.

A letter from the Washington Academy of Sciences asking the Medical Society to join in the publication of a directory of the Academy and affiliated societies was referred to the Executive Committee.

The resignation from active membership by Dr. Max E. Wall was accepted.

WEDNESDAY, DECEMBER 11; President Roy presided; about 25 members present.

The Treasurer reported contributions to the Building Fund.

Dr. Franzoni called attention to the failure of the Committee on Necrology to report suitable resolutions upon the death of a number of members during the past half year. The Chair stated that his address would contain a recommendation regarding this matter.

The President then presented his retiring Address, which was referred to the Executive Committee for consideration of the recommendations made therein. See page 1.

A unanimous vote of thanks was given him for his energetic, impartial, and successful conduct of the affairs of the Society throughout his term of office.

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J. R. NEVITT, M. D.,	1820 Calvert, N. W.

Editorial.

PUBLICATIONS OF THE MEDICAL SOCIETY AND ASSOCIATION.—In view of the prospective erection of a building as a home for the Medical Society it becomes desirable to make a collection of the publications of the Society and Association, for deposit in the new building. It is hoped, therefore, that members will bear the subject in mind and, as opportunity offers, get together such publications as they may have and turn them over to the Committee on History of the Society, of which Dr. I. S. Stone is Chairman.

CENTENNIAL NUMBER OF THE ANNALS, January, 1918.—Extra copies at 20 cents a piece may be obtained from the Chairman of the Committee on Publication, Dr. D. S. Lamb.

HISTORY OF THE MEDICAL SOCIETY OF THE DISTRICT OF COLUMBIA.—Price \$1.00, with 25 cents added if delivered in this city or sent by mail. Address Dr. C. W. Franzoni, 605 I Street, N. W. The books are in the custody of Dr. D. S. Lamb, at the Army Medical Museum.

THE WASHINGTON MEDICAL ANNALS.—Back numbers.—Members of the Society who have back numbers of the ANNALS, and do not intend to preserve them, are requested to send them to the Chairman of the Publication Committee. Requests for such numbers are frequently received.

NOTICE. DISCUSSIONS.—If corrections of discussions do not appear in the text, it is because they have not been received in time.

THE OTHER MEDICAL SOCIETIES OF THE DISTRICT OF COLUMBIA.

Notice.—It is believed that several of the following societies are no longer in existence. The Secretary of each society therefore is requested to send to the Editor the desired information as soon as practicable after the mailing of this number.

THE CASUALTY HOSPITAL MEDICAL SOCIETY.—Meets on the first Friday in October, December, February and April. President, J. D. Rogers; Vice President, W. P. Wood; Secretary, S. B. Pole; Treasurer, C. J. Murphy. It is composed of the following members: N. P. Barnes, J. C. Blackistone, J. H. Diggs, W. A. Frankland, R. M. LeComte, D. O. Leech, J. J. Madigan, W. C. Sparks, A. E. Pagan, C. J. Murphy, C. B. Conklin, R. F. Dunmire, H. Jaeger, S. B. Pole, W. P. Reeves, J. D. Rogers, C. S. White, W. P. Wood, J. J. Mundell, J. R. Wellington.

The object of the Society is to promote the welfare of the Casualty Hospital and Eastern Dispensary.

CLINICAL SOCIETY.—Officers: H. H. Donnally, President; D. Webster Prentiss, Secretary and Treasurer; J. D. Thomas and L. A. Johnson, Censors. The Society meets the second Monday of each month. It has an active membership limited to twenty-five and an inactive membership of those who have finished a term of ten or more years of active membership.

CLINICO-PATHOLOGICAL SOCIETY.—Active membership limited to 25. Inactive membership: those who have withdrawn from active membership after fifteen years. A limited honorary membership of eminent medical men. Meets on the first and third Tuesdays of the month from October to May, inclusive. Officers: Loren B. T. Johnson, President; Thos. S. Lee, First Vice President; Jos. S. Wall, Second Vice President; H. H. Donnally, Secretary-Treasurer.

EMERGENCY HOSPITAL CLUB.—This club was organized early in 1915 by the members of the Staff of the Central Dispensary and Emergency Hospital. Meetings are held on the second Saturday of each month from September to May, inclusive; the officers are as follows: President, V. B. Jackson; Vice President, Edgar Snowden; Secretary-Treasurer, E. M. Ellison.

FREEDMEN'S HOSPITAL MEDICAL SOCIETY.—Meets on the second Wednesday of each month from October to May, inclusive. Composed of physicians connected with the Staff of the Hospital and the Medical Faculty of Howard Medical School. Collins Marshall, President; C. A. Brooks, Vice President; C. A. Allen, Secretary-Treasurer.

GEORGETOWN CLINICAL SOCIETY; twenty-five active members, limited to graduates of the Medical Department of Georgetown University. Meets at the University Club on the third Tuesday in the month. John A. Foote, President; J. Russell Verbruycke, Jr., Treasurer.

GEORGETOWN UNIVERSITY MEDICAL SOCIETY.—Meets on the fourth Saturday of the month at the University Hospital. The membership consists of the Alumni, Faculty and Senior Students of the Medical School. J. A. Gannon, President; T. F. Lowe, Vice President; J. M. Moser, Secretary-Treasurer.

GEORGE WASHINGTON UNIVERSITY MEDICAL SOCIETY.—Organized 1905; membership limited to Alumni of School and Members of the Faculty. Meets in the Medical Building on the third Saturday of each month from October to May. President, C. B. Conklin; Vice President, W. G. Young; Secretary, Thomas Miller; Treasurer, E. G. Seibert; President's Council, Truman Abbe, J. Lawn Thompson, John Van Rensselaer, E. P. Copeland and W. A. Frankland. Active membership, 169.

HIPPOCRATES AND GALEN SOCIETIES.—At a joint meeting of these societies Oct. 4, 1917, they were amalgamated under the name Hippocrates-Galen Society. The membership is limited to 35, with voluntary retired members after 10 years. Meets on second Thursday of each month from October to May, inclusive. President, Carl Henning; Vice President, R. R. Walker; Secretary-Treasurer, E. W. Titus.

MEDICAL HISTORY CLUB of Washington, D. C.—Officers: President, J. B. Nichols; Vice President, John A. Foote; Secretary, F. J. Stockman; Executive Committee, F. H. Garrison, C. A. Pfender and the Officers. Members: Truman Abbe, W. C. Borden, J. H. Bryan, G. Wythe Cook, John A. Foote, F. H. Garrison, Howard Hume, H. W. Lawson, W. J. Mallory, J. B. Nichols, C. A. Pfender, P. S. Roy, W. C. Rucker, F. J. Stockman, I. S. Stone, W. A. White.

MEDICAL AND SURGICAL SOCIETY of the District of Columbia.—President, E. P. Copeland; Vice President, H. H. Kerr; Secretary and Treasurer, L. Eliot; Asst. Secretary, J. H. Talbott; Executive Council, John Dunlop, H. P. Parker, H. G. Fuller, L. H. Reichelderfer and Eliot. The Society membership is limited to 25 active members; 10 honorary members; and inactive members, those who have completed a term of ten years service. The meetings are held on the first Thursday in each month from October to May.

SOCIETY OF MEDICAL JURISPRUDENCE, Washington, D. C.—President, Dr. D. P. Hickling; Vice President, J. M. Kenyon; Secretary-Treasurer, Spencer Gordon. Meets on the second Monday of each month from October to June at University Club. Has from forty to fifty members.

SOCIETY OF OPHTHALMOLOGISTS AND OTOLOGISTS, Washington, D. C., meets the third Friday of each month from October until May, inclusive. Officers: President, Mead Moore; Vice President, Carl Henning; Secy.-Treasurer, J. W. Burke. Active members: A. B. Bennett, Jr., J. W. Burke, V. Dabney, W. T. Davis, C. M. Hammett, Carl Henning, W. H. Huntington, E. B. Jones, A. H. Kimball, R. S. Lamb, F. B. Loring, O. A. M. McKimmie, W. B. Mason, Mead Moore, E. L. Morrison, S. B. Muncaster, W. F. Patten, J. J. Richardson, G. S. Saffold, E. G. Seibert, E. A. Taylor, R. R. Walker, W. A. Wells. Inactive members: J. H. Bryan, W. K. Butler, Wm. H. Fox, L. S. Greene, W. P. Malone, M. E. Miller, W. S. Newell, H. A. Polkinhorn, C. W. Richardson, D. K. Shute, W. H. Wilmer. Associate members: R. H. Goldthwaite, T. C. Lyster, G. B. Tribble.

SOCIETY OF MENTAL HYGIENE, District of Columbia.—President, Gen. Rupert Blue; Vice President, Cuno H. Rudolph; Treasurer, Miss Nellie Sedgley; Dr. Wm. A. White, Chairman Executive Committee; Dr. D. Percy Hickling, Secretary. Chief objects of the committee: To work for the conservation of mental health; for the prevention of mental disease and mental deficiency and for the improvement in the care and treatment of those suffering from nervous or mental diseases or mental deficiency.

SOCIETY OF SOCIAL HYGIENE, Washington, D. C.—President, Dr. Charles F. Stokes, U. S. Navy; Secretary, Lt. Col. J. R. Kean, U. S. Army, Surgeon General's Office. The Society has four committees, namely: Education, Venereal Diseases, Protection of Women and Children, and Psychopathology. Yearly dues, \$1.00. Persons desiring to become members should address Col. Kean and state to which committee they wish to be assigned.

THERAPEUTIC SOCIETY of the District of Columbia.—Meets at the G. W. School of Pharmacy, 808 I Street, N. W., on the first Saturday in each month. E. W. Burch, President; A. P. Tibbets, Secretary.

WALTER REED MEDICAL SOCIETY.—Meets on the fourth Thursday of every other month, from September to May inclusive. Composed of physicians located in the eastern part

of Washington. J. S. Arnold, President; H. R. Schreiber, Vice President; M. H. Prosperi, Secretary; N. E. Webb, Treasurer.

WASHINGTON MEDICAL AND SURGICAL SOCIETY.—President, ———; Vice President, R. R. Walker; Secretary, Walter Van Sweringen; Treasurer, F. E. Gibson; Curator and Librarian, E. H. Egbert; Executive Committee: L. H. Taylor, Chairman, G. S. Clark, G. S. Barnhart; Program and Auditing Committee: Wm. A. Jack, Jr., Chairman, J. R. Nevitt, Walter Van Sweringen; Membership Committee: F. E. Gibson, Chairman, Wm. P. Reeves, Caryl Burbank.

WASHINGTON OBSTETRICAL AND GYNECOLOGICAL SOCIETY.—President, J. F. Moran; Vice Presidents, G. B. Miller, Prentiss Willson; Secretary, Truman Abbe; Treasurer, D. W. Prentiss. Retired members: G. N. Acker, S. S. Adams, E. A. Balloch, J. W. Bovée, W. S. Bowen, W. P. Carr, G. Wythe Cook, M. F. Cuthbert, H. D. Fry, J. T. Johnson, D. G. Lewis, A. R. Shands, E. E. Morse, Elmer Sothoron, John Van Rensselaer.

WASHINGTON PSYCHOANALYTIC SOCIETY.—Meets the second Saturday of each month, from October to May, inclusive. Membership limited to 25. D. Percy Hickling, President; A. A. Wilson, Secretary.

WASHINGTON SOCIETY OF NERVOUS AND MENTAL DISEASES.—President, E. J. Kempf; Vice President, H. T. A. Lemon; Secretary-Treasurer, J. E. Lind. The Society has a limited membership of thirty, but welcomes Physicians and Surgeons interested in Neurology and Psychiatry. Meets monthly on the third Thursday at the Cosmos Club or a member's residence. The first meeting of the season was held at the home of Dr. W. M. Barton, January 17, 1918. Considerable discussion took place as to the advisability of discontinuing the society for the time being, on account of war conditions, or at least of holding less frequent meetings. It was decided, however, to continue for the present and to meet on the third Thursday of each month.

THE WASHINGTON SURGICAL SOCIETY.—Meets at 1621 Conn. Ave. the third Friday of the month at 8 P. M. The officers are H. A. Fowler, President; D. W. Prentiss and Walter Webb, Vice Presidents; H. G. Fuller, Secretary, and J. A. Gannon, Treasurer. Members of Council, H. D. Fry, J. F. Moran and the officers.

WOMEN'S MEDICAL SOCIETY of the District of Columbia.—President, Mary O'Malley; Vice President, Amy J. Rule; Secretary and Treasurer, Lauretta E. Kress; Corresponding Secretary, Edith Se Ville Coale.

The following members of the Society have died since the last number of the ANNALS was published: W. J. Armstrong, Dec. 28, 1918; Frank Baker, Sept. 30; C. W. Brown, Nov. 10; J. C. Blackstone, Dec. 13; F. E. Echols, Oct. 15; Alfred Glascock, Oct. 10, in France, at Base Hospital, where he was acting as psychiatrist; T. S. D. Grasty, Oct. 10; T. B. Kramer, Oct. 11; Thos. Miller, Oct. 6; Susan J. Squire, Dec. 10, at Los Angeles, Cal.; W. E. Turton, Oct. 10, was on duty in the Health Office. Dr. W. B. Hudson, Major, M. R. C., although not a member of the Society, was well known to the members through his connection with the public schools and bathing beach, died in France August 1.

COMMITTEES FOR 1919.

STANDING COMMITTEES.—*Executive Committee*.—To serve one year: E. Y. Davidson, J. B. Nichols, A. L. Stavely. To serve two years: J. A. Gannon, H. T. A. Lemon, W. P. Carr. To serve three years: A. W. Boswell, P. S. Roy, C. S. White. Also *ex officio*, W. G. Morgan, C. W. Franzoni, H. C. Macatee, J. R. Verbrycke, Jr., G. Wythe Cook, V. B. Jackson, D. S. Lamb.

Committee of Censors.—V. B. Jackson, Chairman; Mary Parsons, W. A. Jack, Jr., W. H. Brandenburg, M. H. Price.

Committee on Program.—J. R. Verbrycke, Jr., Chairman; R. A. Hooe, W. S. Bowen, Mary O'Malley, T. A. Claytor.

Committee on Publication.—D. S. Lamb, Chairman; H. C. Macatee, J. S. Wall, R. R. Walker, J. R. Nevitt.

SPECIAL COMMITTEES, as far as appointed.—*Building*.—E. Y. Davidson, Chairman; C. W. Richardson, Vice Chairman; H. T. A. Lemon, Secretary; S. S. Adams, W. H. Atkinson, W. M. Barton, A. W. Boswell, W. P. Carr, E. P. Copeland, A. F. Foye, J. A. Gannon, Frank Hagner, W. H. Hough, V. B. Jackson, L. B. T. Johnson, L. A. Johnson, S. R. Karpeles, D. O. Leech, Frank Leech, T. N. McLaughlin, H. C. Macatee, Louis Mackall, W. G. Morgan, J. B. Nichols, J. D. Rogers, P. S. Roy, C. A. Simpson, A. L. Stavely, A. R. Thomas, J. L. Thompson, J. R. Verbrycke, Jr., C. S. White.

Committee on Necrology.—D. S. Lamb, Chairman; G. Wythe Cook, A. A. Snyder.

Committee on Hospitals in the District of Columbia.—H. T. A. Lemon, J. L. Thompson, E. P. Copeland, R. A. Hooe.

Committee on Memorial to Senator Gallinger.—W. P. Carr, D. P. Hickling, L. J. Battle.

RECENT PUBLICATIONS OF PHYSICIANS OF THE DISTRICT OF COLUMBIA.

S. H. Ayers and P. Rupp; Simultaneous acid and alkaline bacterial fermentations from dextrose and salts of organic acids respectively. *Jour. Infect. Dis.*, August, 188.

Rupert Blue; War and sanitation; *Arkansas Med. Soc. Jour.*, June, 4.

W. C. Borden, U. S. A.; Pasteur's relation to medicine and surgery; *N. Y. Med. Jour.*, Aug. 31, 358.

E. H. Bruns; Reconstruction and rehabilitation of the tuberculous soldier; *Jour. A. M. A.*, Aug. 3, 373.

G. E. Bushnell, U. S. A.; How the United States is meeting the tuberculosis war problem; *Military Surg.*, August, 127. Also, Treatment of tuberculosis; *Amer. Rev. Tuberc.*, July, 259; abstract in *Jour. A. M. A.*, Aug. 31, 772.

C. T. Butterfield; Effect of Plankton animals on bacterial death rates; *Amer. Jour. Pub. Hlth.*, July, 499.

F. C. Cook and E. LeFevre; Chemical analyses of bacteriologic bouillon; *Ibid.*, Aug. 587.

V. Dabney; Two cases of unusual wounding of lateral sinus; *Annals Otol.*, June, 607. Also, Unusual disease conditions apparently cured by tonsillectomy; *Laryngoscope*, June, 479.

R. C. Derivaux; Some results of malaria control by control of insect host; *South. Med. Jour.*, August, 556.

A. C. Evans; Studies on *B. abortus* and related bacteria; pathogenicity of *B. lipolyticus* for guinea pigs; *Jour. Infect. Dis.*, June, 576. Also, Comparison of *B. abortus* with *B. bronchisepticus* and with organisms which cause Malta fever; page 58.

James Ewing; Military aspects of status lymphaticus; *Jour. A. M. A.*, Nov. 9, 1525.

John Foote; Essentials of materia medica and therapeutics for nurses; reviews in *Jour. A. M. A.*, Oct. 19, 1338; *South. Med. Jour.*, August, 598; *Northwest Medicine*, August, 254; *Long Island Med. Jour.*, November, 431.

F. H. Garrison, U. S. A.; History of Medicine, Reviews in *Jour. Indiana State Med. Assoc.*, July, 296, and *New Orleans Med. and Surg. Jour.*, August, 119.

J. Goldberger, G. A. Wheeler and E. Sydenstricker, P. H. S.; Study of the diet of non-pellagrous and pellagrous households; *Jour. A. M. A.*, Sept. 21, 944.

F. W. Hartman, U. S. N.; New methods for blood transfusion and serum therapy; *Ibid.*, Nov. 16, 1658.

Randell Henderson and E. G. Seibert, U. S. A.; Organization and objects of the Medical Research Board, Air Service, U. S. A., *Ibid.*, Oct. 26, 2382.

J. T. Kelley, Jr.; Stone in kidney, report of case; *Va. Med. Mo.*, October, 186.

J. A. LePrince, P. H. S.; Malaria control in the environment of the cantonments; *South. Med. Jour.*, August, 551.

L. Loeb; Grafting of tissues into nearly related individuals in the rat, and mode of inheritance of individuality; differentials; *Jour. Med. Research*, July, 393.

G. W. McCoy, N. E. Waysin and H. B. Corbit, P. H. S.; Potency of antimeningococcic serum; *Jour. A. M. A.*, July 27, 246. Also, G. W. McCoy, V. B. Murray and A. L. Teeter; The failure of a bacterial vaccine as a prophylactic against influenza; *Ibid.*, Dec. 14, 1997.

Edward Martin; How the industrial surgeon can best co-operate with the government to win the war; *Penna. Med. Jour.*, August, 665.

F. Martin; Medical profession in the war; *Indiana State Med. Assoc. Jour.*, October, 361.

G. L. Meigs; The children's year campaign; *Jour. A. M. A.*, July 27, 243.

H. P. Mosher; Report on otolaryngoscopy in first year of war; *Annals Otol., &c.*, June, 437.

J. R. Murlin, U. S. A.; Diet of U. S. A. soldier in the training camp; *Jour. A. M. A.*, Sept. 21, 950.

H. J. Nichols and J. H. Bryan, U. S. A.; The tonsils as foci of infection in streptococcus hemolyticus carriers; *Ibid.*, Nov. 16, 1813.

Mary O'Malley; Certain pluriglandular anomalous functions associated with psychopathic sexual interests; *Jour. Nerv. and Ment. Dis.*, July 1.

R. B. Osgood; The transport splints of the American army; *Jour. A. M. A.*, Aug. 31, 734.

C. A. Pfender; Tuberculous lymph glands of neck treated by Roentgen therapy; *Med. and Surg.*, April, 400.

E. H. Reede; Toxic nonexophthalmic goiter; *N. Y. Med. Jour.*, Sep. 14, 452. Also, Role of vegetative nervous system in diseases of skin; *Jour. Cutan. Dis.*, November, 505.

E. C. Rice, U. S. A.; Anthrax at Camp Hancock, Ga.; *Jour. A. M. A.*, Oct. 5, 1133.

C. W. Richardson, U. S. A.; Syphilitic necrosis of intermaxillary bones; *Annals Otol., &c.*, June, 605. Also, Ear protectors; *Laryngoscope*, July, 514; abstract, *Jour. A. M. A.*, Aug. 17, 600. Also, Re-education of soldiers with defective hearing and speech; *Volta Review*, August, 511.

E. B. Rosa, Lead glass and lead rubber; U. S. Bureau Standards; *Amer. Jour. Roentgen.*, April, 188.

A. H. Samuels; The way out; *Penna. Med. Jour.*, August, 671.

R. W. Shufeldt, U. S. A.; Case of extensive osteoporosis of skull in negro; *Amer. Jour. Syph.*, July, 462. Also, Federal effort to promote science of veterinary medicine; *Med. Record*, N. Y., Aug. 10, 237.

David Silver; The problem of the artificial arm; *Jour. A. M. A.*, July 20, 181.

C. A. Simpson; Nodular syphilis; *Rhode Island Med. Jour.*, September, 131. Also, Treatment of skin diseases with the Kromayer lamp phototherapy; *South. Med. Jour.*, October, 669.

W. F. Snow and W. A. Sawyer; Venereal disease control in the army; *Jour. A. M. A.*, Aug. 10, 456.

G. A. Soper; The pandemic in the army camp; *Ibid.*, Dec. 3, 1899.

H. F. Stoll; System for rapid but thorough examination for pulmonary tuberculosis; *Ibid.*, July 20, 187.

R. Y. Sullivan; Rupture of uterus; *Amer. Jour. Obstet.*, October 589.

J. S. Taylor; Two cases of placenta praevia with identical history; suggesting common etiologic factor; *Ibid.*, September, 438.

T. W. Vaughan; Geologic surveys and eradication of malaria; *South. Med. Jour.*, August, 569.

J. R. Verbrycke; Gastro-intestinal headaches; *Med. Rec.* N. Y., Sept. 14, 454.

C. Voegtlin, G. C. Lake and C. N. Myers; The dietary deficiency of cereal foods with reference to their content in anti-neuritic vitamine. Also, C. Voegtlin and C. N. Myers; The growth promoting properties of foods derived from corn and wheat. Also, Phosphorus as an indicator of the vitamine content of corn and wheat products; Reprint 471 from *Pub. Hlth. Rep.*, June, 1918.

Oscar Wilkinson; New operation for collapsed alae nasi; *Annals Otol., &c.*, March, 145.

T. A. Williams; The management of confusional states; *Wash. Med. Annals*; abstract in *Jour. Med. Soc., New Jersey*, August, 272.

W. H. Wilmer, U. S. A.; Some ocular conditions affecting efficiency of aviator; *Arch. Ophthal.*, September, 439. Also, W. H. Wilmer and Conrad Berens, Jr.; The effect of altitude on ocular functions; *Jour. A. M. A.*, Oct. 26, 1394.

REVIEWS.

F. W. WITTICH, A. M. M. D., Minneapolis, Minn. "INFORMATION FOR THE TUBERCULOUS." St. Louis, C. V. Mosby Co., 1918, price \$1.00.

This small octavo of 150 pages contains in a condensed form and devoid of technicalities a large amount of useful information in regard to the cause, symptoms and treatment of pulmonary tuberculosis. The author himself contracted the disease, but recovered, and, as might be expected, his book is largely the product of his own experience, and has a corresponding value. It seems to be suitable for the intelligent tuberculous patient. There is little if anything to criticise. Of course, some medical practitioners may differ with him on some points. He especially recommends the sanatorium.—D. S. LAMB.

THE TREATMENT OF CAVERNOUS AND PLEXIFORM ANGIOMA BY THE INJECTION OF BOILING WATER—WYETH METHOD. By FRANCIS REDER, M. D., F. A. C. S. St. Louis, C. V. Mosby Co.

This book is a good example of an evil that has crept into medical book publishing and against which the profession should take a decided stand. I refer to undue padding. In this particular instance a journal article has been expanded into a book of seventy-five pages, less than half of which is text. Two separate pages are given up to different views of a glass syringe and three pages to an index, which is totally unnecessary, as the book can be read in fifteen minutes. By refusing to buy such books the evil can be checked. As to the merits of the book, it may be said that the injection of boiling water or steam has a distinct place in the treatment of vascular growths and that the technic of the method is well described in this book. That the method is not faultless is indicated by a case that came under the notice of the reviewer, where the injections were made by no less a surgeon than Dr. Wyeth, the principal exponent of the method. The result was far from ideal. To any one desiring information as to this method of treating vascular growths the book will give such information and be of use.—E. A. BALLOCH.

EMERGENCIES OF A GENERAL PRACTICE. By NATHAN CLARK MORSE, M. D., F. A. C. S. St. Louis, C. V. Mosby Co.

In the bewildering multiplicity of books coming from the medical press, many of doubtful merit and some of no merit whatever, it is a pleasure to encounter a book that justifies its right to exist. There have been many books on emergencies but none with the wide scope of this volume. It is emphatically a book for the general practitioner; a book by a practical man with a sure knowl-

edge of what he is talking about, for other practical men needing the information that he gives. The range of the book cannot be indicated better than by a summary of its chapters. These cover the removal of foreign bodies of all kinds; treatment of asphyxiation from all causes; surgical emergencies; medical emergencies; miscellaneous emergencies; fractures and dislocations; obstetric emergencies, and poisoning from drugs used as medicines, as well as that from acids and alkalies and ordinary poisons. Each subject is treated in a concise but thorough way, illustrations being used where necessary. In his preface the author states that his object is "to consider the common, unheralded, everyday accidents or emergencies that may and do arise to confront the general practitioner at a time when least expected." In this he has succeeded admirably, and the book is one to which the medical man may turn in any emergency with the assurance that he will find the information that he needs and that the information will be reliable.—E. A. BALLOCH.

THE HODGEN SPLINT. By FRANK G. NIFONG, M. D., F. A. C. S. St. Louis, C. V. Mosby Co.

The title of this book is misleading. It is very much more than an exposition of the merits of the Hodgen splint. It is, in fact, one of the best books on fractures of the long bones that it has been our pleasure to read for a long time. The author is gifted with a lucid, concise style which makes his statements clear and convincing. Any one reading this book will have a better knowledge of the physics and mechanics of fractures of the femur than he had before.

The author emphasizes the importance of extension, suspension and immobility in the treatment of fractures of the long bones and demonstrates that these features can be secured better by the Hodgen splint than by any other and with the minimum of discomfort to the patient. He shows also that this splint secures in a simple and mechanically perfect way all that the much-lauded Blake splint secures by a much more complicated apparatus. The Hodgen splint was born of one war and the present war is demonstrating that it is based on correct mechanical principles. But, as the author well says: "To be successful in treating fractures one must necessarily know well the anatomy and functioning of the part. He should know also pathology and the possible influence which disease, including senile changes, may have in their relation to fractures. Unless, however, he is also equipped with a *mechanical* sense, he may, though skilful in diagnosis, still be a bungler in therapeutics. Some have this mechanical sense as a natural gift; others seem to lack it almost entirely."

There are one or two misprints. For instance, on page 20,

"enervation" should read "innervation," and on page 85 "imbri-cated" is meant instead of "embrocated" as printed.

The author modestly describes his work as that of a neophyte. This may be true, but it is true also that he can give points to many of the masters in the matter of saying clearly what he has to say and stopping when he has said it. The book is commendable from every point of view.—E. A. BALLOCH.

ABSTRACTS OF WAR SURGERY. St. Louis, C. V. Mosby Co. Price, \$4.

This is an abstract of the surgical literature of the war, appearing since 1914, prepared by the Division of Surgery of the Surgeon General's Office for the use of medical officers of our army. To those prevented by one reason or another from obtaining first-hand knowledge of war surgery this volume is of great interest. Being, as it is, the cream of surgical war literature for the past four years, it may be regarded as a faithful picture of that surgery. In reading it one can see how methods and conditions were bettered steadily as the war went on, to the great advantage of the patient.

One naturally looks first to see if there are any new and striking developments, and finds that there are not. The general principles of surgery remain unchanged. Experience in war has, however, taught us many things in the treatment of wounded men. Some of these may be noticed. The first and most important of all is that the quicker a wounded man gets under the care of a surgeon the better his chances of recovery. This is now one of the axioms of military surgery. It is in this connection that the motor ambulance shows its superiority to its horse-drawn predecessor, being not only more rapid but vastly more comfortable. Wounded men obliged to lie from twenty-four to forty-eight hours without attention, as they were obliged to lie during the early months of the war, do badly. They suffer from shock and the danger of tetanus is imminent. Robertson states that the soil of France, wherever cultivated, is so saturated with tetanus bacilli that the inoculation of a laboratory animal with one grain of such a soil invariably produces tetanus. The prophylactic injection of from 500 to 1,000 units of tetanus antitoxin, given subcutaneously or intra-muscularly, is satisfactory. The x-ray has proved to be invaluable in the location of fragments of shell and all other foreign bodies. Its use increased steadily as the war went on. The second point is that a wound should be cleaned out with conscientious thoroughness. In the case of shell and shrapnel wounds this means the enlargement of the wound and the excision of all dead and bruised tissue. Actual living muscle should be reached in every part of the wound.

Such wounds, after operation, may be closed primarily and will do well.

The use of antiseptics has not proved to be of much avail. The Carrel-Dakin method is good, if time and place permit of its use as it should be used. This means that its use is confined practically to base hospitals. The oily preparations of the hypochlorites, like chloramine T, give promise of being useful.

Contrasted with the lessons of the Boer war, experience in this war has shown that abdominal wounds do better if operated upon, the earlier the better. Conversely, wounds of the cranium are better left alone. Such patients should not be moved unless absolutely necessary. Patients of this character that were doing well at the Casualty Clearing Station did badly after being moved to a base hospital. Percy Sargent says that surgical intervention is rarely required for the relief of cerebral symptoms, whether general or local. A slow pulse in this class of cases does not mean that there is compression, but that the case is one that is likely to do well.

The descriptions of trench foot resemble markedly those of chilblains. It is the result of prolonged exposure to cold, especially to wet cold. That interference with the blood supply is a factor is shown by the fact that there were comparatively few cases of this malady in the Belgian army, where puttees are not used. Tetanus is likely to occur in these cases, especially when blisters have formed.

In the immobilization of fractures the Thomas splint or one of its many modifications has given more satisfaction than any other appliance. Extension is secured by traction.

In the treatment of wounds of joints there was constant progress until, finally, such wounds were treated by operation, early and radical. Operation should consist of excising the wound and all dead tissue, opening the joint, cleaning and irrigating it and then closing the whole wound as if it were an aseptic wound. Remarkable results have followed this method of treatment. For its success it is essential that the incisions around the wound edges be carried quite clear of all infected tissue and that strict asepsis be observed.

In wounds of the chest prompt closure or covering of the wound gives the best results. Thoracotomy was freely practiced.

It is a disappointing fact that this war has added nothing new to our knowledge of the cause of shock. Every surgeon has his theory and none is satisfactory. Much had been hoped from the experiments of Porter and other physiologists at the front, but they offer nothing at all conclusive. Emphasis is laid by all upon the effects of cold, fatigue and exposure to wet in the production of shock, but we knew all this before. A low blood pressure

means a bad prognosis. The diastolic reading is the more important. The ultimate cause of shock is yet undetermined—a great pity, since never again will the opportunities for observation upon the human animal be as great. In the treatment of shock the old familiar methods of rest, warmth, stimulation and blood transfusion are the stand-bys as they have always been.

Enough has been said, I fancy, to indicate the great interest and importance of this work to all practical surgeons. It is a book well worth owning, and no one interested in surgery as influenced by the greatest war in history can afford to be without it.

Naturally, it is based mostly upon the experience of English and continental surgeons, but is none the less valuable on that account.—E. A. BALLOCH.

See "The New Building" page 6.

PERSONAL NOTES.

Caroline C. Bovée, wife of Dr. J. W. Bovée, died in this city Nov. 21, 1918; was buried at Watertown, N. Y.

Henrietta Cole, wife of Dr. J. T. Cole, died suddenly Oct. 20.

Dr. R. R. Cooke, of the Pension Office, and who was also practicing here, died Sept. 4.

Dr. C. R. Dufour has been appointed Professor *emeritus* of Diseases of the Eye and Ear at Georgetown Medical School.

Mrs. Caroline J. Heger, widow of the late Dr. Anthony Heger, of the U. S. Army, and also a member of this Society, died Dec. 28, at Somerville, N. J.

Dr. J. T. Kelley has succeeded Dr. I. S. Stone as Professor of Gynecology at the Georgetown Medical School.

Dr. F. J. McCauley, Lieut., M. C., U. S. A., was married June 25, to Miss Eileen Berry, of Newark, N. J.

Catherine A. McKaig, wife of Dr. Joseph F. McKaig, died Oct. 11.

Drs. J. M. Moser and J. A. Foote have been appointed Assistant Professors of Pediatrics at the Georgetown Medical School.

Mrs. Georgie Dove Todd, widow of Dr. S. J. Todd, of this Society, died in this city Oct. 30.

Last report of changes of station of physicians of the District of Columbia serving in the army:

Lt. F. D. Adams, Camp Crane, Pa.

Maj. R. D. Adams, New Haven, Conn.

Lt. J. H. Allen, Walter Reed Hospital.
Lt. J. L. Anderson, New Haven, Conn.
Lt. Col. J. T. Aydelotte, Camp Shelby, Miss.
Capt. C. L. Barber, Camp Humphreys, Va.
Capt. N. P. Barnes, Fort Oglethorpe.
Maj. C. L. Beaven, Rochester, Minn.
Capt. L. P. Bell, Rockefeller Institute.
Lt. Sacks Bricker, Colonia, N. J.
Lt. B. M. Buckett, Army Medical School.
Lt. A. D. Butz, Fort Oglethorpe.
Lt. Col. W. T. Cade, Jr., Camp Sherman, Ohio.
Lt. J. A. Cahill, Jr., Hoboken, N. J.
Lt. W. B. Carr, Fort Riley, Kan.
Col. W. P. Chamberlain, Army Medical School.
Col. J. T. Clarke, Boston, Mass.
Lt. R. Cohen, Fort Oglethorpe.
Lt. C. B. Conklin, Long Beach, N. Y.
Major John Constat, Washington, D. C.
Capt. H. C. Cook, Fort Oglethorpe.
Lt. O. J. Cook, Fort Oglethorpe.
Lt. Col. J. S. Coulter, Hoboken, N. J.
Lt. S. C. Cousins, Camp Crane, Pa.
Lt. C. B. Covey, Camp Greene, S. C.
Capt. O. C. Cox, honorably discharged.
Maj. L. D. Cruice, Camp Dodge, Iowa.
Lt. J. B. G. Custis, Fort Ontario, N. Y.
Lt. J. R. Darnall, Newport News, Va.
Lt. D. G. Dickerson, Plattsburgh Barracks.
Maj. C. M. Dollman, Camp Gordon, Ga.
Lt. H. F. Dunn, Edgewood, Md.
Col. R. G. Ebert, Vancouver Barracks.
Maj. W. G. Erving, Walter Reed Hospital.
Lt. M. B. Fischer, Camp Baker, Texas.
Lt. W. E. Frank, Fort Oglethorpe.
Capt. W. A. Frankland, Camp Humphreys, Va.
Lt. Bernard Glueck, Camp Custer, Mich.
Maj. D. N. W. Grant, Camp Gordon, Ga.
Lt. A. L. Guerra, New Haven, Conn.
Capt. C. D. Haas, Hoboken, N. J.
Lt. Col. J. E. Hall, Camp Holabird.
Maj. W. E. Hall, Camp Beauregard, La.
Lt. Col. W. L. Hart, Hoboken, N. J.
Capt. H. L. Hayes, Williamsburg, N. Y.
Maj. J. M. Heller, Hot Springs, N. C.
Lt. M. J. Hirschman, Camp McClellan, Ala.
Maj. A. B. Hooe, Camp Crane, Pa.

Maj. J. S. Hough, Camp Knox, Ky.
Capt. W. H. Huntington, Camp Dodge, Iowa.
Maj. T. D. Hurley, Surgeon General's Office.
Capt. C. W. Hyde, Mineola.
Capt. L. A. Johnson, Fort Oglethorpe.
Capt. L. B. T. Johnson, Walter Reed Hospital.
Capt. P. B. Johnson, Newport News, Va.
Capt. S. C. Johnson, Camp Taylor, Ky.
Lt. Col. J. F. Johnston, Camp Wadsworth, S. C.
Maj. A. B. Jones, Camp Devens, Mass.
Lt. S. R. Karpeles, Rockefeller Institute.
Col. F. R. Keefer, Carlisle, Pa.
Lt. E. J. Kempf, Mineola.
Lt. Col. E. King, Camp Meade.
Maj. J. J. Kinyoun, Washington, D. C.
Lt. W. P. Kirby, Camp McClellan, Ala.
Lt. Col. E. D. Kramers, Pittsburgh, Pa.
Capt. P. E. Larkin, Camp Devens, Mass.
Lt. R. H. Leece, Walter Reed Hospital.
Maj. Frank Leech, Camp Sevier, S. C.
Lt. C. F. X. Leibell, Fort Oglethorpe.
Lt. W. N. Lipscomb, Fort Oglethorpe.
Lt. Col. F. B. Lund, Camp Crane, Pa.
Lt. Col. E. C. McCulloch, Rochester, Minn.
Lt. Col. H. B. McIntyre, Camp Bowie, Texas.
Capt. A. M. MacNamee, New Haven, Conn.
Maj. J. O. McReynolds, Camp Dick, Texas.
Capt. W. J. Mallory, Walter Reed Hospital.
Capt. W. J. Manning, Walter Reed Hospital.
Capt. L. A. Martel, Rockefeller Institute.
Lt. W. A. Mess, Camp Lee, Va.
Maj. J. F. Mitchell, Fort McPherson, Ga.
Lt. D. B. Moffett, Fort Oglethorpe.
Lt. W. B. Moffett, Walter Reed Hospital.
Capt. V. T. Moore, Plattsburgh Barracks.
Lt. Col. A. W. Morse, Hoboken, N. J.
Capt. S. Moskowitz, Camp Sheridan.
Lt. J. A. Murphy, Camp Wadsworth, S. C.
Maj. E. B. Neff, Long Beach, N. Y.
Maj. T. E. Neill, Rockefeller Institute.
Lt. N. P. Nelson, Army Medical School.
Lt. Lester Neuman, Walter Reed Hospital.
Lt. Col. H. J. Nichols, Surgeon General's Office.
Maj. Gen. R. E. Noble, Hoboken, N. J.
Capt. A. C. Norcross, Camp Meade.
Lt. L. E. Payne, Camp Gordon, Ga.

Lt. Col. L. R. Poust, Camp Dix, N. J.
Lt. D. W. Prentiss, Camp Crane, Pa.
Maj. H. T. Price, Camp Wadsworth, S. C.
Lt. P. S. Putzki, Hoboken, N. J.
Capt. A. J. Read, Eastern Department.
Lt. Col. J. J. Reddy, Camp Cody, N. M.
Lt. J. C. Riggin, Camp Devens, Mass.
Lt. A. F. Roche, Camp Bowie, Texas.
Capt. F. W. Romaine, Camp Upton, N. Y.
Lt. L. C. Rosenberg, Camp McClellan, Ala.
Maj. W. C. Rucker, Newport News, Va.
Capt. G. L. Saffold, Newport News, Va.
A. L. Schneider, honorably discharged.
Col. E. R. Schneiner, Walter Reed Hospital.
Lt. Col. A. W. Schoenleber, Camp McClellan, Ala.
Capt. H. L. Schurmeier, Camp Custer, Mich.
Lt. Col. G. H. Scott, Camp Greene, N. C.
Lt. Col. E. G. Seibert, Mineola.
Maj. J. S. Simmons, New Haven, Conn.
Lt. C. A. Simpson, Fort Oglethorpe.
Lt. Col. W. H. Smith, East Norfolk, Mass.
Lt. Edgar Snowden, Camp Lee, Va.
Lt. M. C. Sosman, Camp Sherman, Ohio.
Capt. H. H. Stromberger, Camp Sevier, S. C.
Maj. R. Y. Sullivan, Walter Reed Hospital.
Capt. W. Van Swearigen, Camp Bowie, Texas.
Lt. E. A. Taylor, Camp Greene, N. C.
Lt. W. J. G. Thomas, Surgeon General's Office.
Col. W. F. Truby, Surgeon General's Office.
Capt. H. F. W. Warden, Camp Crane, Pa.
Col. A. H. Webber, Camp Jackson, S. C.
Capt. W. O. Wetmore, South Baltimore.
Capt. G. F. White, New Haven, Conn.
Lt. J. B. White, Camp Gordon, Ga.
Capt. L. M. White, Washington, D. C.
Maj. A. S. Wild, West Point.
Maj. R. R. Williams, Norfolk, Mass.
Col. W. H. Wilson, Fort Sam Houston.
Lt. Col. F. W. Wood, Hoboken, N. J.
Col. G. T. Woodbury, Camp Gordon, Ga.
Lt. C. E. Young, Fort Oglethorpe.



WASHINGTON MEDICAL ANNALS

INTRAVENOUS VACCINE (PROTEIN) THERAPY.*

BY JOHN BENJAMIN NICHOLS, M. D.,
Washington, D. C.

During the past seven years reports from observers of high reliability and authority have appeared in the medical literature concerning the intravenous injection of bacterial vaccines in the treatment of typhoid fever and other infections, especially arthritis. The earlier work was done with typhoid fever, but it later appeared that the same principles and methods are applicable with other infections. At first, also, stress was laid on particular methods of preparing or sensitizing the vaccines used; and it was supposed that the results observed were due to specific anti-bacterial reactions corresponding with those involved, for example, in the subcutaneous vaccine treatment of staphylococcus infections and gonorrheal arthritis, anti-typhoid immunization, and the like. Later, however, it was claimed that the effects of intravenous injection of bacterial vaccines are not due to the bacteria as such, or to their kind, or to the method of preparing or sensitizing the vaccine, or to any specific bacterial reactions, but chiefly or entirely to the introduction of foreign protein into the blood stream. In a given infection heterologous vaccines may produce the same results as homologous vaccines when intravenously injected; thus, in typhoid fever a colon vaccine may yield the same results as a typhoid vaccine, or in streptococcus infections typhoid vaccine may act in precisely the same way as the specific organism would. Indeed, the same results have been produced by the use of proteins of entirely non-bacterial origin. A considerable variety of protein substances has been employed in the various investigations of the subject, such as typhoid, colon, meningococcus, gonococcus and staphylococcus vaccines, vaccines made from non-pathogenic bacteria, tuberculin, albumose, proteose, peptone, sterilized milk, pollen protein, vegetable protein (from millet and alfalfa seed), horse serum, chicken serum, etc.; all, it is claimed, with identical results.

* Read before the Medical Society, January 22, 1919.

The vital processes that take place after the intravenous injection of bacterial vaccines are therefore apparently no specific bacterial reactions, but are due to proteins contained in the bacteria; proteins from different sources, bacterial or non-bacterial, producing like results. The reactions from the intravenous injection of dead bacteria appear to be radically different from those of their subcutaneous or intramuscular injection. The term intravenous protein therapy would seem a more appropriate designation for the method than intravenous vaccine therapy; and it is frequently referred to as "non-specific therapy." The whole subject seems to open up a special field in biochemistry and therapeutics.

While different bacterial vaccines or other protein preparations might be equally eligible for practical therapeutic use, the dosage and action of ordinary typhoid vaccine have been best worked out and standardized, and it has been most used and for the present must be regarded as the preferable agent to employ. The initial dose should not be over 20,000,000 to 40,000,000 dead typhoid bacilli, injected intravenously; in subjects not reacting excessively this dose may be gradually and cautiously increased. The amount of protein actually represented by these doses is very minute, 100,000,000 dried typhoid bacilli weighing about 1/80th milligram, or about 1/5000th grain. In a large proportion of the reported cases a cure or full therapeutic result is claimed to be produced by a single dose; if necessary, the injections may be repeated three or four times two to four days apart, or even (in arthritis) ten or more doses may be given daily or every other day. It is said that if in typhoid fever no therapeutic results are obtained from three or four injections no further benefit is to be expected from continuance of the treatment. Alcoholism and marked cardio-vascular disease are regarded as contraindications to the method.

The injections are regularly followed by a marked reaction, which is usually about as follows:* In from thirty to sixty minutes a chill begins, which continues for a quarter of an hour to an hour or longer, accompanied by headache, nausea, sweating, etc. The chill may be very mild, manifested only by chilliness or sweating; or it may be very violent, with delirium, vomiting, involuntary urination and defecation, cyanosis, cardio-vascular collapse, herpes. Following the chill there is a sharp rise in temperature of several degrees, reaching a maximum in three or four hours, and then rapidly subsiding; hyperpyrexia, 106° to 108°, may occur. Characteristic changes occur in the leucocytes of the blood, both in typhoid fever and arthritis cases; within the first hour after the injection the leucocytes fall in number to normal

* For a full study of the reaction see a paper by Francis J. Scully, "Journal of the American Medical Association," July 7, 1917, vol. LXIX, page 20.

or even well below, and then rapidly increase to a high point, frequently over 20,000 or 30,000; figures over 75,000 and 100,000 (in arthritis) have been noted. The maximum leucocytosis is attained in five or six hours, after which there is for about the same length of time a rapid fall, and then a gradual decline until the original figure is reached about the second day. Differential counts show that the increase in the number of leucocytes is mainly due to an increase of the polymorphonuclears. During the chill there is a rise in blood pressure, and afterward a marked decrease, frequently to below 100 (systolic), the lowest point being reached in about six hours, and the normal being again attained by the second day. The outward manifestations of the reactions ordinarily subside completely after five or six hours, and the patient appears exactly as before the injection. According to the dose given and the individual susceptibility, the reactions range through all grades of severity, from very mild to very violent. Violent delirium, hyperpyrexia, cardio-vascular collapse, etc., may occur, and a number of deaths have resulted from the injections. The possibility of violent and dangerous reactions constitutes a serious objection to the use of the method. Intravenous vaccine injections should not be undertaken without a keen appreciation of the possible dangers involved, and the initial doses ventured should be very moderate.

According to the advocates of this therapeutic method, in the great majority of cases the reaction resulting from the intravenous vaccine injection is immediately followed by subsidence or amelioration of the clinical conditions present; that is, the fever subsides, either abruptly (by crisis) or gradually (by lysis), and continues absent; or the pain and inflammation of the affected joint at once lessen or disappear altogether. In a large proportion of cases, it is claimed, even a single injection effects immediate and complete and permanent relief or cure; though sometimes a repetition of the injections is necessary to produce therapeutic results. In some cases no improvement is afforded.

This treatment has been carried out chiefly for typhoid fever and infectious arthritis, several hundred cases of each having been reported by various observers. With typhoid fever it is claimed that in more than half of the cases the course of the fever is cut short, usually abruptly by crisis, less frequently by a more gradual decline or lysis; the accompanying symptoms are relieved along with the subsidence of the fever. In acute arthritis the proportion of cures claimed ranges mostly from 50 to 80 per cent, with improvement in other cases, and no benefit at all in something like 10 per cent or less. In subacute arthritis the results are a little less favorable; and in chronic arthritis improvement is attained in a small proportion of the cases.

It is obvious that if such results as these are generally obtainable in typhoid fever and acute arthritis we have available a therapeutic agency of a potency and certainty far greater than any other means at our command for these diseases. The only drawback would be the possibility of violent and dangerous reactions; and further refinement of the technic might enable these to be controlled or avoided. Theoretically, also, the method might be applicable to infections in general or to a wider range of infections than that in which it has heretofore been employed (septicemia, pneumonia, etc.).

A number of explanations have been attempted as to the way in which therapeutic results are brought about by this method, such as the effect of the hyperpyrexia or hyperleucocytosis on the invading organisms, stimulation of antibody-forming mechanisms, mobilization of ferments or antiferments, etc.; but it is evident that these explanations are at present entirely hypothetical, and that our actual knowledge of the vital reactions involved is as yet very nebulous. What we do know is that the intravenous injection of bacterial and some other proteins produces an immediate reaction of a very definite and marked character; and seemingly in addition to this a therapeutic effect is produced in some cases of infectious disease that eliminates or mitigates the morbid factors present. What the conditions are that bring the therapeutic action into operation in some cases and not in others is entirely unknown.

It is conceivable that this therapeutic action may occasionally be brought about by subcutaneous or intramuscular injections of suitable protein, as well as by intravenous injection. In some of the investigations of the subject the intramuscular injection of sterilized milk was claimed to produce effects similar to those of intravenous protein injections. The marked benefit that occasionally seems to follow the subcutaneous injection of anti-streptococcic serum, even in non-streptococcic cases, may be an exemplification of a protein reaction rather than a specific reaction. The effects of injection of leucocytic extract may possibly also belong to this same category.

The subject has an important bearing on the vexatious question of "phylacogen" therapy. Many physicians claim to have obtained marvelous results from the use of phylacogens; many others utterly repudiate their use, partly on ethical grounds, partly on account of the severe and dangerous reactions known to occur. Presumably, the phylacogens are a form of sensitized vaccine. Their subcutaneous or intramuscular use doubtless has no effect different from or superior to that of any other corresponding sensitized vaccines. Their intravenous injection should yield results identical with those of the intravenous introduction of

vaccines or foreign proteins in general, and their use in this way seemingly constitutes an exemplification of the therapeutic method under consideration in this paper. As an agent for intravenous injection phylacogens have no superiority over a simple typhoid vaccine or corresponding preparation, which is more definitely known, and the effects and dosage of which can be better standardized. It is probable that the dosage of phylacogens as frequently given has been excessive, as to amounts given and the frequency and number of injections.

While different bacterial proteins may produce identical effects when introduced intravenously, I am not personally convinced that all other proteins act in the same manner. For example, when we compare the violent reactions resulting from the injection of a minute fraction of a milligram of bacterial substance with the complete absence of such reactions after the intravenous injection of horse serum in such massive amounts as 50 cubic centimeters or more, as in the serum treatment of pneumonia, there would seem to be a fundamental difference in the action of these two classes of proteins.

My personal experience with intravenous vaccine therapy covers 10 cases of typhoid fever and 6 of arthritis, all in my medical service in Freedmen's Hospital in the summers of 1916 and 1917. In the summer of 1916 I used a typhoid vaccine prepared by myself, in 4 typhoid and 2 arthritis cases; in 1917 I employed the United States Army typhoid vaccine in 6 typhoid and 4 arthritis cases. The patients were all colored, 8 of each sex; and in age ranged from 12 to 50 years. From one to three injections were given in each case, totaling 30 injections in all. At first I used initial doses of 100,000,000 and 150,000,000, as then specified in the literature; but finding these doses capable of evoking dangerous reactions I ultimately settled on 35,000,000 as the initial dose, increasing to 50,000,000 or 60,000,000 in subsequent injections. With these doses, no unduly severe reactions occurred.

Typical reactions, as described in the literature, were produced by the injections, manifested outwardly mainly by a chill in about an hour, with sweating, followed by a rise in temperature for five or six hours. The increase in leucocytes a few hours after the injection was demonstrated in numerous instances, though not so marked as noted in the literature. Different individuals reacted with differing intensity to equivalent doses. The reactions diminished in degree when repeated in the same individual. The reactions varied much in intensity. In some cases they were very mild, the chill being very slight, manifested by mere chilliness, or absent altogether, or replaced by sweating. In one typhoid case a very violent and alarming reaction oc-

curred; an injection of 150,000,000 was followed by a violent chill with profuse perspiration, and a rapid rise in temperature to 108° ; the patient became wildly delirious, requiring two attendants to hold him in bed, and had involuntary defecation and urination; after a few hours the effects of the reaction entirely passed away.

Therapeutic results: In the six arthritis cases, there was no perceptible benefit from the injections in four cases, two of them being protracted febrile cases (14 weeks, 25 weeks), the other two afebrile and lasting 9 and 11 weeks. In one case, of mild character, without fever, also under salicylate treatment, injections were given on the 24th and 25th days; the pains and inflammation of the joints cleared away on the 26th day. In another case, injections given on the 35th and 39th days were followed in two or three days by nearly complete disappearance of the symptoms. The improvement in these two cases might possibly be credited to the treatment; and yet they were mild cases undergoing their natural evolution, and the improvement may have been merely coincidental with, and not dependent on, the injections.

Of the ten typhoid-fever cases there was only one in which a favorable therapeutic result could plausibly be attributed to the treatment; in the other nine the results were negative or doubtful.

In the one case apparently favorably influenced the defervescence was very protracted; an injection was given on the 43d day, which was followed after the 45th day by complete and continued apyrexia. I have observed other instances of very protracted defervescence in typhoid fever in which subcutaneous injection of typhoid vaccine was soon followed by cessation of the pyrexia; and I am inclined to believe that in such cases, either subcutaneous or intravenous vaccine injections evoke an influence that causes the cessation of a sluggish persistent fever.

One of the typhoid cases suffered a very violent and alarming reaction (already described) from a single injection of 150,000,000; after the following day the temperature in this case for a week scarcely exceeded 100° , but later went higher, and the total duration of the pyrexia was about 28 days; there was therefore no therapeutic gain in this case.

In one case the fever continued only 9 days after the patient took to bed; but it is doubtful if, and not demonstrable that, this was brought about by the injections, as there were other similarly brief cases in the ward at this time.

Two of the ten cases died, one of intestinal hemorrhage, one of gradual cardiac failure. Three of the cases had intestinal hemorrhage on the day following injection, one proving fatal; two of these cases had had hemorrhage several days prior to the injections. While this may have been coincidence, I am rather

inclined to the suspicion that the inoculations may tend to promote intestinal bleeding; and in future I should be cautious in giving the injections to a patient who had had hemorrhage.

My therapeutic results with this method of treatment, in both arthritis and typhoid fever, have therefore been quite dubious and disappointing. The immediate and striking results claimed by other observers have not been in evidence in my cases. The potency of my injections seems attested by the production of typical reactions. Although some of the cases did very well, there was no assurance that the improvement was due to the injections, or would not have occurred without them. From my personal experience (in, however, a limited number of cases) I have not been able to demonstrate unmistakably any great therapeutic efficacy of the method.

While my experience with the method has been much too limited to afford a basis for any broad generalization, it has at least been somewhat instructive. It has demonstrated the vigor of the vital reactions following the intravenous injection of bacterial substance and the risks run and the caution that should be exercised in employing this procedure. While disappointing in not affording any clear and unmistakable demonstration of marked therapeutic benefit, from the reports of reliable observers I feel that occasionally, under conditions unknown and unpredictable, the intravenous and even subcutaneous injection of bacterial and other proteins in various acute infections may give the organism a jolt that in some unknown way causes an arrest or mitigation of the course of the disease.

DR. J. H. BRYAN was glad to hear the paper and glad of Dr. Nichols' conservative position. Dr. Bryan felt all at sea as to vaccine therapy and he was not alone in his ignorance. He wished to relate the unfortunate case of a young woman, pregnant, who in the course of an upper air passage infection developed edema of the glottis, requiring tracheotomy. She was given a desensitizing dose of anti-streptococcus serum and later was given a large dose of this same serum. In a few hours she had a violent rigor, then hyperpyrexia, and soon died. He felt that she had absolutely been killed by the treatment.

DR. C. E. FERGUSON had been using vaccines for many years and had learned to proceed very cautiously. His practice is always to give a subcutaneous dose first and to observe the result before giving it within the veins. It has been his observation that patients are better after a little chill has been provoked by the treatment. He felt unable to express an opinion as to why vaccines do good in these cases.

DR. F. S. AVERY had treated many cases and had had much success with the use of phylacogens. He had first employed the method in the case of a boy who had been absolutely refractory to treatment, who was emaciated and suffering with endocarditis and chorea. He employed phylacogen according to the method advocated by Parke, Davis & Company. It was necessary to give thirty-seven injections, but the boy eventually made a perfect recovery. Dr. Avery cited a number of other cases.

DR. T. A. CLAYTOR would say nothing against the use of phylacogens, because he knows nothing about them, but when salicylate will produce a prompt cure of acute rheumatism when given in sufficient doses, there is no reason to use anything potentially dangerous.

DR. FREDERICK YATES said that Dr. Claytor's remarks reminded him of a severe case of rheumatism in which phylacogen failed to relieve but which cleared up completely under heavy doses of salicylate.

DR. P. S. ROY said that certainly he had not had the good results that Dr. Claytor had had with salicylate; Dr. Roy would feel in future that he would certainly have to try it more carefully.

DR. W. GERRY MORGAN said that the discussion reminded him of his own personal experience when the elder Janeway cured him with frequent doses of fifteen grains of aspirin and nothing else.

DR. G. M. KOBER congratulated the Society on hearing Dr. Nichols' paper and especially upon the warning against the indiscriminate use of vaccines. He made a plea for the use of the old well-tried methods.

DR. NICHOLS, in closing, said that he was interested in Dr. Bryan's case. We can recognize three types of reaction against proteins: First, the typical protein reaction with urticaria, etc.; second, anaphylactic shock; and third, the vaccine reaction. A proper estimate of therapeutic results is always difficult to make. Indeed the whole question of vaccines and phylacogens is very perplexing. Some workers claim wonderful results in great numbers of cases, but why does not this result in the rapid introduction of these remedies into practice? In arthritis, if a direct cure or amelioration should follow an injection of such an agent, that would pretty definitely show the effect of the agent; but if 25 or 30 injections are required in as many days, the majority of cases would get well in that length of time anyway.

CASE OF TETANUS.*

BY D. P. HICKLING, M. D.,

Washington, D. C.

Thelma H., a white girl, 13 years of age, slight in build and of a decidedly nervous temperament, with a previous history of being in a good mental and physical condition, on Oct. 16, 1918, complained of stiffness and soreness of the muscles of the jaw, also of pain between the shoulder blades which caused some deformity of the upper part of the spine. The next day she seemed somewhat better, but on the 18th she was much worse, complaining of severe pains in her back and chest with a jerking of the muscles of her whole body; these jerking spells would occur every five or ten minutes, her jaws being locked so as to prevent her from separating her teeth more than half an inch, and there was considerable difficulty in swallowing, only liquid nourishment being taken and that from a nursing bottle.

I first saw her in consultation with Dr. Roy, on Oct. 24, about one week after the beginning of her attack. I found her sitting up in a chair, as they said it was impossible for her to lie in bed on account of the pain and discomfort. The muscles of the jaw, face, back and abdomen were in a condition of tonic contraction. Before I could begin the examination she had quite a severe tonic spasm of the whole body, the teeth closed, the body and neck thrown backward, the arms and legs sharing in the convulsion, consciousness remaining clear but great pain being complained of. I was told that this was a typical attack which occurred with from five to ten minute intervals, and several more of the same nature occurred during the examination. The persistent tonic spasms of the muscles of the face caused a distortion of the features, so that the "Risus Sardonius" was apparent although not as well marked as usual in these cases. The spasmodic condition of the back and shoulders gave the spine such a curvature that the mother believed that her trouble was due to an injury to the spine, as the girl had been skating on the street every afternoon, and had had several falls. The frequent spasms had caused the patient great pain, loss of sleep, and she had bitten her tongue several times, so that her life was quite miserable; her bowels were constipated, urine negative, temperature normal; pulse was quite rapid, showing 120 beats to the minute. At times during the later period of her illness there was an edema of the feet and a diplopia.

* Reported to the Medical Society, January 15, 1919.

There was no history of a wound given, although the patient had complained of pain over a corn which had apparently been made worse by the pressure of a skate strap, although there was no local sign of inflammation, only a slight tenderness on pressure. On closer questioning, however, the patient recalled having fallen about two weeks before with considerable force, striking her knee, tearing her stocking, and knocking the skin off of her knee, which did not bleed. A close examination of this part, however, showed no local disturbance.

While the early rigidity of the jaw, neck and face muscles with the superadded tonic contractions of the trunk and limbs were in this case so well marked as to leave no doubt as to the diagnosis, even without the history of infection, yet it may be of interest to refer briefly to the differential diagnosis of these cases.

Diagnosis.—Tetanus resembles at times and has to be differentiated from strychnine poisoning, tetany, hydrophobia, meningitis, epilepsy and hysteria, the resemblance being due to the convulsive condition. In strychnine poisoning the history of the administration of the drug, the more sudden and severe onset, the flaccid condition of the muscles between the convulsive seizures will eliminate very promptly any confusion.

In the parathyroid syndrome of tetany the absence of the continuous spasm, the trophic disturbances and the disturbances of sensation, the obstetric hand and the absence of Trousseau's, Chvostek's and Erb's symptoms, together with the mental state of anxiety which is so constant, should prevent any mistake in this direction.

Hydrophobia, at times, on account of similar convulsive attacks, may be thought of, although the history of infection, the early difficulties in swallowing, the earlier affection of the respiratory muscles, the elevated temperature and the hallucinations and delusions so constantly found, should prevent any mistakes in the diagnosis.

Meningitis, on account of the spasms of the muscles of the neck and trunk muscles constituting opisthotonos, can be easily eliminated by the clouding of consciousness, vomiting, head pains and the paralysis of the various cranial nerves.

The epileptic convulsion, being characterized by unconsciousness and clonic spasms, can be eliminated at once.

The hysterical conditions are apt to cause some confusion in the diagnosis.

The complete train of symptoms which are so constant in tetanus is, of course, absent in hysteria, the bilateral and general contractures found in tetanus are absent in hysteria or if present affect one region only; the unconsciousness and clonic convulsions

and the stigmata of hysteria so constantly found between the attacks will enable the diagnosis to be promptly made.

Course, Duration and Treatment.—The course, duration and treatment of Thelma H. is interesting. On Oct. 25, six days after the onset of the disease, 3,000 units of antitoxin were administered; this according to the weight and age dosage was about equal to 7,000 units for the adult; this was given with the idea of preventing the further increase of the toxine in the patient, and no appreciable effect was noted either in the severity or frequency of the convulsions which continued without any apparent change until Nov. 2, the 17th day of the disease. Previous to this the patient had been on large doses of morphia sulphate, quarter grain doses being given every two, three or four hours to quiet pain and produce sleep. In addition to this, bromides and chloral were given in full doses every four hours night and day while awake. Magnesium sulphate was given frequently and freely by mouth as a laxative, and fomentations of the same were used to the swollen feet. At this time small doses of arsenic were substituted for the chloral in the bromide mixture, and one minim of the fluid extract of calabar bean was given every four hours, when the convulsive attacks at once began to be of shorter duration with longer intervals, and by Nov. 9 they had ceased, so that the morphia was stopped and the patient began to walk about the rooms and halls. On the 15th she felt entirely well, the contractures disappeared, the abdominal and shoulder muscles relaxed completely, and she went down stairs to her meals and played the piano, feeling perfectly well. My last visit being made Nov. 24.

Dr. P. S. Roy said that the first time he had seen this patient was while calling upon another patient. He was asked to see the child on account of some muscular pain between the shoulders which seemed to be rheumatic and for which he prescribed salicylate and bromide of soda. The abrasion on the knee had not been considered as having anything to do with the case. Somewhat later a slight spasmodic twitching of the shoulder was thought to be due to some spinal injury sustained when the child fell. Later the appearance of tetanus made the diagnosis clear and Dr. Hickling had been asked to take charge of the case.

✓ MEDICAL STUDIES IN AVIATION.*

BY E. G. SEIBERT, M. D., PHAR. G., LIEUT. COL., U. S. A.,

Washington, D. C.

The development of the Air Medical Service was a natural result of the application of aeronautics to military needs.

In no aspect of life does man so change his environment as when he leaves the ground for a flight into the air. Through the centuries man's impressions have been from an environment the basis of which was Mother Earth, and these impressions have been so grounded in his mental activities that all forms of motor control have been correlated therewith.

It is perhaps not too much to say that since man has been able to record and preserve his thought, evidence shows up at intervals of his desire to imitate the eagle in mounting into the realms of space. Certainly there have been many instances of efforts to fly, even down to our familiar Darius Green and his flying machine.

I shall not attempt to analyze the reasons for this constant wish of man to fly, but a search for such reasons would make an interesting field for speculative philosophy.

It shall be more to the point for us to consider the effect upon man of the fulfilment of this long desired wish. The student of ethnology can point out to you the changes in racial characteristics brought about by changes of environment. Effects which alter racial characteristics must be profound from a physical standpoint. Therefore, any pronounced alteration of physical environment must produce a decided alteration of physical and physiologic processes. Such decided alteration of physical and physiologic processes coupled with conditions of prolonged stress and strain would seem to be the ideal combination to bring about mental and physical inefficiency, and no other combination of circumstances on God's green earth could so effectively produce such a result as the application of aeronautics to the needs of the military service in the present war.

In the suddenness with which war was forced upon the world by the Hun, the evolution of medical care of flying men had not begun. Many pioneers in the flying game had had their day of spectacular performance which ended by their no less spectacular death.

We all retain in our memories the men who gave up their lives that man might securely accomplish the hope of the ages. These pioneers were, however, relatively few in number.

The establishment of aviation corps by the British and French armies brought, necessarily, large numbers of men into the flying

* Read before the Medical Society, March 5, 1919. Illustrated by moving pictures.

game. These men had to be taught the special knowledge necessary to man to fly. The cost has been enormous. The flying game soon came to be looked upon as the most hazardous in military service and only the sporting man who took his gambler's chance thought of the air service as the one of his selection.

The experience gained by the British and French service was accomplished at the expense of many wrecked lives and smashed aeroplanes. The onrush of the German hordes in 1914 gave no time for investigation. Every man of England, France and Belgium was called upon to give his last ounce of energy to the service. At the end of the first year of the war the result of the stress was shown in the appalling individual inefficiency developed in the Royal Flying Corps. Sixty-five per cent of the total strength of the corps was unfit for duty. Because of demands of other services, replacements were difficult to make. A remedy was sought and attention was attracted to medical efforts to conserve the efficiency of flying men. Concentrated effort was made during the following year to bring about changes in the care of these men and apply certain principles believed to be needful because of changed conditions. The end of this year showed the inefficiency of the corps reduced from sixty-five to twenty per cent, and in the third year of the war, a further reduction to twelve per cent. To my mind, this is a distinct triumph for reasoning logically developed from scientific medical principles.

It was the result of these studies by the British Air Medical Service, which came to us in the fall of 1917, that led to the formation of the Medical Research Board. In September of that year I was directed by the Chief Surgeon, A. S. S. C., to gather data upon the effects of altitude, and confer with Prof. Yandell Henderson and Major John B. Watson relative to the formation of a Group or Board to consider the conditions that would have to be studied in order to work out a policy to be adopted for the care of the men forming our flying service. To the above named were added Major Wm. H. Wilmer, of Washington, and Major E. R. Lewis, of Dubuque, Iowa.

This group was created by orders as the Medical Research Board, Aviation Section, Signal Corps, U. S. A., and its principal function was to study all conditions which affect the physical fitness of pilots.

At this time the most vital problem confronting the Board was the effects of altitude.

Problems of physical fitness for the army in general had all been worked out and applied. There had been up to that time from the beginning of our entry into the war many thousands of young men, the pick of the country, given the thorough and complete physical examination required for entry into the Air Service.

Altitude problems, as applied to military aeronautics, however, were almost an unexplored field. It is true the British Air Medical Service had done a large amount of experimental work along this line, but there was yet a vast amount to be done. Fortunately, we were able to study their work and begin from the point they had reached.

By the development of the rebreathing apparatus in general use by physiologists, data were secured which have formed the basis of a rating examination developed by the Board and which allow of a classification suitable for the military duties of our Aviation Corps.

Military aviation in its infancy was restricted to observation of gun fire. With the increase of efficiency of planes and pilots new duties developed upon flying men, so that the third year of the war saw the service classified into scout and combat work, day bombing, artillery observation, night bombing, and later, "strafing," or attack on infantry, supply trains, etc.

This classification was brought about largely by the different altitudes at which these duties were performed. Scout and combat work may take the pilot to any altitude. "Twenty-six thousand feet and the ceiling still going up" is the way one cable from General Pershing put it. Day bombing is commonly carried on at altitudes varying from 16,000 to 18,000 feet. Artillery observation usually ranges from 6,000 to 8,000 feet, and night bombing at the lower altitudes up to 1,000.

The results of the investigations by the Board into the effects of altitude upon man showed that physique was not a guide to the ability to withstand these effects. These results showed conclusively that there was a wide variation in men as to their ability to withstand altitudes. They did prove, however, that physical fitness was absolutely essential to avoid the dangers induced by altitude intoxication and demonstrated beyond all doubt that altitude does produce such marked systemic effects as to be classed as an intoxication of so severe a type as to greatly depress vital function, destroy efficiency completely, and stand as the cause of many hitherto unexplained accidents. Also that repeated exposure to these intoxications rapidly induces the development of a chronic inefficiency, so aptly shown in the large number of washed-out aviators who were sent here by the British, French and Italian services during the war, to act as instructors to our men, and the most of whom were killed by aeroplane accident in such service.

The classification of pilots which forms the "rating" of aviators is based upon effects of "low oxygen" on different individuals. There may be a number of reasons given for these several degrees of rating, all based upon points of inefficiency developed as

a result of deprivation of oxygen. By these means, however, it can be clearly shown that men may be divided into several groups. The groups adopted by the Board are as follows: AA, Any altitude; A, Any altitude below 25,000 feet; B, Up to 15,000 feet; C, Up to 8,000 feet; D, Unfit to fly at any altitude.

As might be inferred from the rigid examinations for entry into the service, the "D" ratings were few in number, but the "B" and "C" ratings showed that this investigation is worth while.

This whole situation means that if a man with a "C" rating were sent into an altitude of 10,000 feet or over he was liable to be killed. An instance proving just this point is of record. In August, last, Captain ——— was sent into an altitude of 12,000 feet by his C. O. without the altitude test having been given him. He fainted, plane made a vertical dive to the ground and he was killed.


When you consider that this man's education as a flier cost the government \$50,000.00 and his plane \$8,000.00 to \$10,000.00, the work seems worth while purely from a money viewpoint.

Certain it is then, the Board's work has proven one fact: that so long as men fly they will need the supervision of medical men who will have to be trained in the work developed by the Medical Research Board.

Aviation is a new field of man's endeavor. The physiologic changes that are developed by the great changes in man's environment have such profound effect upon his physical and mental efficiency that make absolutely needful that he have this special supervision. Where he does not have it, experience has shown that the ultimate result is disaster and death. A flying service demands it.

OBITUARY NOTICES.

DR. FRANK BAKER was born August 22, 1841, at Pulaski, N. Y. Died in Washington, D. C., Sept. 30, 1918. Son of Thos. C. and Sybil S. Weed Baker. Was sergeant in the 37th New York Volunteers 1861-63. Was employed in the Light House Board of the U. S. Treasury Department, Washington, 1872-89; Asst. Genl. Supt. in the Life Saving Service 1889-90. Graduated in Medicine, 1880, at the National Medical College, Washington (now George Washington University), and served as assistant to the chair of anatomy for awhile. Professor of anatomy at the Georgetown Medical School, this city, from 1883 till his last illness. Was given the degree of A. M. 1888, Ph. D. 1890, and LL. D. 1914, Georgetown University. Superintendent of the National Zoological Park, this city, from 1890 to 1916. Joined



the Medical Society, D. C., Oct. 14, 1885; resigned Dec. 18, 1889; rejoined Dec. 6, 1911, after the amalgamation with the Medical Association. Married, Sept. 13, 1878, May E. Cole, at Sedgwick, Maine. Has a son, Colonel Frank A. Baker, Med. Corps, U. S. A. Editor of the American Anthropologist 1891-8. Author of many works, especially the following: Articles in Wood's Reference Handbook of the Medical Sciences, Billings' National Medical Dictionary, Standard Dictionary, and International Encyclopedia. Member of many societies; Amer. Assn. Adv. Sci.; Vice President in 1890; American Naturalists; Assn. Amer. Anatomists, President in 1897; Philadelphia Zoölogical Society; one of the founders of the Washington Biological Society; Washington Anthropological Society, President 1897-8; Washington Academy of Sciences, Secretary from 1890 to 1911; Medical History Club, President in 1913.

✓ DOCTOR JULIAN CHEW BLACKISTONE was born in 1880 in St. Mary's County, Md., died Dec. 13, 1918. Attended the public schools in Washington. Graduated in medicine in 1906 at the Georgetown Medical School and afterwards practiced medicine in this city, making a specialty of urinary diseases. Sometime on duty at Garfield Hospital, and Washington Asylum Hospital, Skin and Cancer Hospital, New York City. Attended sometime the Johns Hopkins University. Unmarried. Died of cancer of the bone. Buried at All Saints' Cemetery, St. Mary's County, Md.

✓ FRANCIS SHERMAN ECHOLS.—Born Oct. 30, 1882, at Providence, R. I. Died Oct. 15, 1918, at Newport News, Va. His family removed from Providence to Hartford, Conn., where he attended the public school. Also attended a coeducational school at Blairstown, N. J. Afterwards for three years attended the University of Virginia. Graduated, M. D. 1915, at the Maine Medical School. Had a summer course at the Boston Floating Hospital. Was one year at the Lawrence General Hospital, Lawrence, Mass., and fourteen months at the Middlesex Hospital, London, England. Began to practice in Washington in 1917. After the outbreak of war of this country with Germany he entered the Public Health Service. While on inspection duty at Newport News, contracted influenza, from which he died. He joined this Society Jan. 11, 1918. Married Miss Marion Vail Temple, of Trenton, N. J., at Camden, N. J., Feb. 7, 1907. He had met her at the Blairstown School.

✓ DOCTOR ALFRED GLASCOCK, who joined this Society March 30, 1912, died of pneumonia, October 10, 1918, at a Base Hospital in the interior of France, where he was serving as psychiatrist. Born at Leesburg, Va., 1881, son of Captain Alfred Glascock, of Fauquier County. Educated at the Episcopal High School near Alexandria, Va. Graduated in medicine at Columbian University,

afterwards George Washington, in 1902. Served at St. Elizabeth Hospital, this city, from April 1, 1903, to April 15, 1918, when he resigned to enter the army. At the hospital he was at first an intern, afterwards junior and senior assistant physician. In the army, Captain, Medical Corps, he was at first on duty at Camp Hancock, Ga., afterwards went overseas. His duties were those of psychiatrist.

JOSEPH JAMES KINYOUN.—Born Nov. 25, 1860, in Yadkin County, N. C. Died at his home in Washington, D. C., Feb. 14, 1919, of lymphosarcoma of neck. Eldest child and only son of Dr. John Hendricks Kinyoun, M. D., LL. D., and Elizabeth Conrad Kinyoun. The family removed to Centreville, Mo., in 1866, where the father continued to practice medicine until his death a few years since. Dr. J. J. Kinyoun graduated M. D. at Bellevue Hospital Medical College in 1882; practiced with his father for several years. Appointed Assistant Surgeon Marine Hospital Service in 1886. Because of his interest in bacteriology and his ability, he was sent to Europe, representative of the Service, and worked with Koch in Berlin when the tuberculin theory was first made known, and with Pasteur, Rue, Calmette, Nocard, Verhoff and Metchnikoff. Founder and first Director of the Hygienic Laboratory in this city and probably was more proud of and devoted to this project than any other work. While in the Service he designed the "Kinyoun-Francis" Disinfectors and Disinfecting Barges. Was also Prof. Hygiene and Bacteriology 1890-2, and Pathology and Bacteriology 1892-99, and special lecturer on Immunity and Serum Therapy 1903, at the Georgetown Medical School. He did post graduate work at the Johns Hopkins in 1888. The Ph. D. degree was conferred on him by Georgetown University in 1894. In 1895 he was decorated with the order of Bolivar by the Republic of Venezuela for eminent sanitary services rendered that republic. In May, 1899, he was placed in charge of the U. S. Quarantine Station, Angel Island, Calif., where he handled many thousand Chinese and Japanese and the troops returning from the Spanish-American war. Because he reported the presence of Bubonic Plague in California and carried out his orders to prevent its spread, he encountered violent opposition and persecution, but "in the face of threats and bribes, with unswerving devotion to duty, he went about his daily tasks with a price hanging over his head." In 1902 he represented the Service in Japan, associated with Dr. Kitasato, in research work and study of tropical diseases. He is said to have been the youngest officer in the service to reach the grade of surgeon, and is also said to have been the first person to make a microscopical diagnosis of Asiatic Cholera in this country. He resigned from the Service in 1903 and became Director of the Mulford Labora-

tories at Glenolden, Pa. Returned to Washington in 1907 and was Prof. Pathology and Bacteriology at the G. W. Medical School 1907-9. For ten years he was Bacteriologist to the District of Columbia. In 1917-18 he was given leave of absence, resigning from the Medical Reserve Corps of the Navy, to serve as expert epidemiologist in the army; was appointed Major and served in North and South Carolina until Dec. 6, 1918, when he was ordered to duty in the Surgeon General's Office.

He was a member of many learned societies and author of many papers. Joined the Medical Society of the D. C. Oct. 7, 1908. Married, June 27, 1884, Miss Elizabeth Perry, of Centreview, Mo., only child of Col. N. W. and Catherine Elizabeth Houx Perry. He is survived by his wife and four children: Alice Eccles Kinyoun, First Lt. Joseph Perry Kinyoun, First Lt. Conrad Houx Kinyoun, and J. N. Kinyoun.

May 20, 1899, he was given a complimentary dinner by the physicians of Washington in recognition of his scientific work, especially the manufacture of diphtheria antitoxin at the Hygienic Laboratory.

DR. THOMAS BEST KRAMER died October 11, 1918. Born Feb. 18, 1852, in Baltimore, Md. Son of Rev. Samuel Kramer, Major, 3d Maryland Vols., 1861-5. Grandson of Lieut. John Jacob Kramer of the War of the Revolution. Dr. Kramer attended the Philadelphia College of Pharmacy, graduated in medicine in 1887 at Howard Medical School. Practiced awhile in Brooklyn, N. Y., afterwards in Washington. Married Luanna Crook. Joined the Medical Society October 1, 1902.

DOCTOR SUSAN JOHNSON SQUIRE, a member of this Society from October 7, 1896, died at Los Angeles, Cal., Dec. 10, 1918. Born in Baltimore, Md., March 17, 1841; where also she attended school. Married Dr. Linus T. Squire, of Washington. No children. Graduated in 1889 at Howard Medical School, this city. Practiced medicine at Orlando, Fla., 1889 to 1894; afterwards in Washington until 1908. Was sometime Clinician at The Woman's Clinic, this city.

✓ DR. EDWARD MARTIN SCHAEFFER. Born Sept. 30, 1843, at Jamaica, Long Island, N. Y. Son of Dr. George C. and Mary Martin Schaeffer. Educated in a private school and under a tutor. Came to Washington in November, 1852. About March 1, 1865, was appointed a Hospital Steward, U. S. Army, and assigned to duty at the Army Medical Museum, in the Microscopical Section. March 1, 1871, was appointed Acting Assistant Surgeon, continuing on the same duty. In the meantime he studied medicine and graduated at the National Medical College, Washington, in 1868. His contract as Acting Assistant Surgeon was annulled July 1, 1874.

He joined the Medical Association May 17, 1873, and the Medical Society Oct. 6, 1874; was dropped from the latter in 1899, but renewed his membership July 10, 1911, when the Association and Society were amalgamated. As a member of the Society he served on a number of important committees; as Oct. 15, 1884, on a committee to secure a revision of the charter of the Society, which revision however failed to materialize; June 10, 1885, on a committee on the water supply of the District of Columbia, chairman of the committee; in 1881 on the Committee on Publication; 1884-5, on the Board of Censors; 1876-85 and 1887-92 on the Committee on Microscopy.

After his connection with the Museum ceased he devoted himself to microscopical work and teaching, and gave particular attention to handwriting and its identification; he became a well known expert in this field, appearing in many important legal cases in the District courts and in other parts of the country. He also served awhile as Coroner of the District, and as such was quite prominent in the trial of Schneider for murder and in the Ford's Theatre disaster. Died November 30, 1917.

His portrait appears in group 30, page 113, of the History of the Medical Society. He leaves a widow, Rose M. Schaeffer, and a daughter, Hilda Vernon Schaeffer.

PROCEEDINGS OF THE MEDICAL SOCIETY DISTRICT OF COLUMBIA.

WEDNESDAY, JANUARY 8, 1919.—The President, W. Gerry Morgan, presided; about 25 members present.

Dr. Davidson reported that Dr. Franzoni, the Treasurer, was recovering from illness, which had prevented completion of his annual report. The Society voted its sympathy for the Doctor, and its earnest hope for an early recovery.

Dr. Nichols, for the Executive Committee, reported that the committee had organized for the current year and had elected him Chairman, Dr. W. P. Carr, Vice Chairman, and Dr. H. C. Macatee, Secretary. The committee recommended the following:

1. That the Society instruct the Committee on History to collect and record data concerning the services performed by the Society and its members in the great war.

2. That the Society instruct the Corresponding Secretary to communicate with the chairmen of all the special committees now standing and request that they submit reports.

3. That the Society instruct the delegate to the A. M. A. to propose in the House of Delegates that efforts be made to secure

such amendments of the regulations under the Harrison anti-narcotic law as shall permit the renewal of physicians' prescriptions on the same basis as proprietary remedies are allowed to be sold over the counter.

4. That an honorarium of \$100.00 be given Mr. H. Ralph Burton, Counsel for the Society.

Recommendations 1, 2 and 4 were adopted, but number 3, being a question of public policy, the Corresponding Secretary was directed to give notice of its consideration at the next meeting.

The following were elected active members: George J. Epard, G. W. University, 1911, and John Arthur Pfeiffer, Univ. Maryland, 1908.

The Chair announced the deaths of the following members: Wm. J. Armstrong, Susan J. Squire and Julian C. Blackistone, and requested the Committee on Necrology to take the proper action.

A letter from Dr. I. S. Stone was read, suggesting the propriety of inviting medical officers of the public services stationed in Washington to attend the meetings of the Society. The Corresponding Secretary was directed to send notices of meetings to the offices of the Surgeons-General, to the Council of National Defense, and the Naval Dispensary.

Application for active membership was read from Daniel Delehanty Vincent Stuart, Jr., Georgetown University, 1908. Referred to the Committee of Censors.

The President made the following committee appointments for the current year:

Committee of Censors: V. B. Jackson, Chairman; Mary Parsons, W. A. Jack, Jr., W. H. Brandenburg, M. H. Price.

Committee on Program: J. R. Verbrycke, Jr., Chairman; R. A. Hooe, W. S. Bowen, Mary O'Malley, T. A. Claytor.

Committee on Publication: D. S. Lamb, Chairman; H. C. Macatee, J. S. Wall, R. R. Walker, J. R. Nevitt.

Committee on Building: E. Y. Davidson, Chairman; C. W. Richardson, Vice Chairman; H. T. A. Lemon, Secretary; W. H. Atkinson, S. S. Adams, A. W. Boswell, W. M. Barton, W. P. Carr, E. P. Copeland, A. F. Foye, J. A. Gannon, F. R. Hagner, W. H. Hough, V. B. Jackson, L. A. Johnson, L. B. T. Johnson, S. R. Karpeles, D. O. Leech, Frank Leech, T. N. McLaughlin, H. C. Macatee, Louis Mackall, W. G. Morgan, J. B. Nichols, J. D. Rogers, P. S. Roy, C. A. Simpson, A. L. Stavelly, A. R. Thomas, J. L. Thompson, J. R. Verbrycke, Jr., C. S. White.

Dr. W. P. Carr presented a specimen of debris removed by him from the pleural cavity. Discussed by Dr. Chipman.

WEDNESDAY, JAN. 15.—President Morgan presided; about 40 members present.

Dr. Davidson, for the Building Committee, reported that the second note of the building lot had been paid, and there was a substantial balance on hand to apply to the third and last note; he stated that if all the subscriptions due and those payable in 1919 were paid at once, the lot could be paid for in full.

The recommendation of the Executive Committee in regard to the anti-narcotic law was discussed, especially by Dr. Motter, and further discussion postponed to the next meeting.

Dr. D. P. Hickling reported a case of tetanus. Discussed by Dr. Roy. See page 43.

Dr. J. E. Lind read a paper entitled "Some remarks on the form of Traumatic Neurasthenia called Railway Spine." Discussed by Drs. T. A. Williams, Hickling, S. S. Adams, and Lind.

WEDNESDAY, JAN. 22.—President Morgan presided; about 45 members present.

The Corresponding Secretary reported that he had written to the Surgeons-General of the three public services, to the Council of National Defense, and the Army and Navy Dispensaries, giving a standing invitation to officers attached thereto, to attend the meetings of the Society, and had received replies from three, expressing thanks for the invitation and indicating a willingness to post notices of the meetings on their bulletin boards.

A special honorarium of \$100 was ordered to be paid to the Treasurer for the year 1918, in view of the additional labor imposed on him by the activities of the Building Committee.

The recommendation of the Executive Committee in regard to the anti-narcotic law was discussed by Drs. Roy, Kober, and W. C. Woodward (in a letter), and laid on the table.

Dr. P. S. Roy reported two cases: 1, A growth pressing on the lung and treated with the x-ray; Dr. Groover showing the x-ray plates; and 2, A case of phlegmonous colitis. The first case was discussed by Drs. Groover and Pfender; the second, by Drs. Folkmar and Verbrycke.

Dr. J. B. Nichols read a paper entitled Intravenous Vaccine (Protein) Therapy. Discussed by Drs. Bryan, Ferguson, Avery, Claytor, Yates, Roy, Gerry Morgan, Kober and Nichols. See page 35.

WEDNESDAY, JAN. 29.—President Morgan presided; about 60 members present.

Dr. Davidson, for the Building Committee reported that the building lot had been paid for in full; and he hoped soon to present a plan for the building. Dr. Kober urged the importance

of providing for an income-producing feature in the plan. Dr. Davidson said that the policy of the Building Committee was to submit all questions to the Society for approval.

Dr. R. A. Hooe, for the Federation Committee, reported progress.

Dr. D. S. Lamb, for the Committee on Necrology, reported obituary notices for Drs. J. C. Blackistone, Alfred Glascock, T. B. Kramer and S. J. Squire. See pages 50, 52.

The recommendation of the Executive Committee in regard to the anti-narcotic law was taken from the table and recommitted to the committee.

Dr. L. S. Savage presented a patient with Spontaneous Pneumothorax, with report of the case. Discussed by Drs. Tewksbury, Verbrycke, Gerry Morgan, Claytor, C. W. Richardson and Savage.

Dr. V. B. Rench reported three cases of Epistaxis and two of Palatal-paralysis following Influenza. Discussed by Drs. C. W. Richardson, S. S. Adams, D. O. Leech, J. H. Selby and Rench.

Dr. C. A. Simpson read a paper entitled Post Influenza Alopecia. Discussed by Drs. Pfender and Simpson.

Dr. L. Tayler-Jones reported a case of an infant born with Influenza.

WEDNESDAY, FEB. 5.—President Morgan presided; about 75 members present.

Dr. D. S. Lamb, for the Committee on Publication, reported the issue of the January number of the Annals and presented the bill, \$182.14, which was ordered paid.

Permission was granted to Mrs. Ross to address the Society in regard to certain welfare committees, which were prepared to do work for girls infected with venereal diseases or who may have become pregnant.

Dr. T. A. Williams addressed the Society on Nervous Disorders in the Army. Discussed by Drs. W. P. Carr, Verbrycke, Hickling, Loren Johnson and Williams.

WEDNESDAY, FEB. 12.—President Morgan presided; about 55 members present.

The Treasurer submitted his report for the year 1918.

Dr. W. H. Hough reported a case of Pituitary Tumor and presented the patient; he also presented a specimen of pituitary tumor. Dr. Groover showed roentgenograms of skull in the first case. Dr. F. V. Atkinson gave the clinical history of the second. Discussed by Drs. Williams, Loren Johnson, Roy, Reeves and Hough.

Dr. Lester Neuman read a paper entitled A clinical study of the Complement Fixation Test for Tuberculosis. Discussed by Drs. Hough, Bernton, Kober and Neuman.

WEDNESDAY, FEB. 19.—President Morgan presided; about 60 members present.

The Chair announced the death of Drs. J. J. Kinyoun and W. E. Poulton.

Dr. Davidson, for the Building Committee, reported that the architect was preparing a sketch plan for the proposed new building.

A letter from Mr. Ralph Burton, counsel for the Society, thanking the Society for the honorarium, was read.

The following appropriations were made: Rent of hall, Oct. 2 to Dec. 11, 1918, \$40.00; printing for Treasurer, \$12.25; printing for Corresponding Secretary, \$58.95; miscellaneous expenses of Corresponding Secretary, \$5.10.

Drs. R. B. Carmichael, W. T. Davis and W. G. Morgan reported a case of Double Cataract with severe chronic eczema and periodical asthmatic seizures in a girl of 14, and presented the patient. Discussed by Drs. (Major) Newcomb, Nichols, Simpson, Verbrycke, W. G. Morgan, H. H. Hazen, J. A. Turnbull, Carmichael and Davis.

Dr. J. A. Turnbull of Boston, Mass., read a paper entitled Some Disturbances Produced by Proteins, and demonstrated his method of making the skin test for protein sensitization on a number of patients. Discussed by Drs. Carmichael, Nichols, Verbrycke, Simpson, W. T. Davis and Turnbull. The Society gave a rising vote of thanks to Dr. Turnbull.

WEDNESDAY, FEB. 26.—President Morgan presided; about 85 members present.

Dr. J. W. Lindsay, for the Committee on Contagious Diseases, made report; referred to Executive Committee.

Dr. W. C. Borden reported a case of Double Empyema and presented the patient. Discussed by Drs. Crichton, C. S. White and Borden.

Dr. H. S. Bernton read a paper entitled New Conceptions of Pneumonia.

Dr. Wm. L. Clark, Philadelphia, spoke on The Limitations of Electrothermic Methods in Surgery; illustrated by lantern slides. Discussed by Drs. W. P. Carr, R. S. Lamb, E. A. Simpson, Pfender and Clark. A rising vote of thanks was given to Dr. Clark.

WEDNESDAY, MARCH 5.—President Morgan presided; about 60 members present.

Dr. Nichols, for the Executive Committee, reported the following recommendations: 1. That the Society adopt the report of the Committee on Contagious Diseases, after due notice is given to the members.

2. That a preamble and resolution, as to instructions to the delegate to the A. M. A., in regard to the anti-narcotic law, be considered by the Society, after due notice to the members.

The recommendations were agreed to.

Dr. Daniel V. Stuart, Jr., Georgetown University, 1908, was elected an active member.

The following applications for active membership were read: Harry Saul Burton, Harvard Medical School, 1908; Jerome F. Crowley, Georgetown University, 1918; Charles Daniel Easton, Harvard, 1904; Ernest Luther Morgan, Johns Hopkins, 1912; Joseph Douglas McCue, Col. Phys. and Surg., Boston, 1910; Leo Brison Norris, Georgetown Univ., 1917; Roy Lyman Saxton, Georgetown, 1918; Roy Anson Thornley, Georgetown, 1914; Geoffrey Williams, College of Med. Evangelists, 1916.

Also for associate membership, Knud Knud-Hansen, Municipal physician, St. Thomas, Virgin Islands.

The Chair called attention to an advertisement in a newspaper, which quoted him as recommending the advertised article, and stated that he disclaimed all responsibility in the matter, and had demanded the withdrawal of the subject matter referred to.

The paper of Dr. Bernton, read at the previous meeting, was discussed by Drs. Kober and Bernton.

Dr. C. W. Richardson reported an unusual case of Syphilis. Discussed by Drs. Hagner, W. H. Hough and Richardson.

Dr. (Lieut. Col.) Seibert addressed the Society on Medical Studies in Aviation; illustrated by moving pictures. His address was extended by Dr. (Lieut. Col.) Gapen. Both gentlemen were given a rising vote of thanks. See page 46.

WEDNESDAY, MARCH 12.—Vice President Ada R. Thomas presided; about 55 members present.

Dr. Davidson, for the Building Committee, reported that building plans were being completed.

Dr. D. S. Lamb, for the Committee on Necrology, reported obituary notices for Drs. Edward M. Schaeffer, Frank Baker and Joseph J. Kinyoun. See pages 49, 51, 52.

The report of the Committee on Contagious Diseases was considered; discussed by Drs. Roy, Health Officer W. C. Fowler and G. Wythe Cook. The Society authorized the Chairman of the Committee to confer with the Health Officer and report back to the Society.

Dr. H. C. Macatee reported a case of unusual congenital defects and presented the patient. Discussed by Drs. D. S. Lamb, Acker, T. C. Martin, Barton and Macatee.

Dr. T. C. Martin reported three cases of Fecal Impaction of Rectum. Discussed by Drs. Folkmar and Martin.

Dr. W. P. Carr reported a case of Intestinal Obstruction and presented the patient and specimen. Discussed by Drs. Kober and Carr.

Dr. R. S. Lamb reported a case of Endocrinopathy simulating pituitary tumor and presented the patient; Dr. Groover showed x-ray pictures of the skull. Discussed by Drs. Reede, Biggs, Ada Thomas and Lamb.

WEDNESDAY, MARCH 19.—President Morgan presided; about 55 members present.

Dr. P. S. Roy reported a case of Myasthenia Gravis. Discussed by Drs. Pfender and Roy.

Dr. J. F. Moran showed motion pictures demonstrating the Forces of Childbirth and the Mechanism of Labor, by his "hand" method.

WEDNESDAY, MARCH 26.—President Morgan presided; about 55 members present.

The Society welcomed with applause the presence of Dr. Franzoni after his long absence on account of illness.

Dr. Verbrycke reported a case of Unusual Displacement of Caecum and Appendix. Discussed by Drs. T. C. Martin, W. P. Carr, W. G. Morgan and Verbrycke.

Dr. Davidson, for the Building Committee, presented the proposed plans for the new building and offered the following resolutions which were adopted: *Resolved*, That the Society endorse and approve the plans and recommendations of the Building Committee; and

Further resolved, That the Building Committee be and it is hereby authorized and empowered to secure the services of an architect and builder, and to proceed with the construction of the building when in the judgment of the Trustees for the Society there are sufficient funds available for that purpose.

WEDNESDAY, APRIL 2.—President Morgan presided; about 55 members present.

The Treasurer reported for March, receipts, \$310.00; disbursed, \$59.68.

The resignations from membership of Drs. L. B. Thomson and Sacks Bricker were accepted and the assessment for the centennial year, due by Dr. Bricker, was remitted.

Dr. D. S. Lamb, for the Committee on Necrology, reported an obituary notice of Dr. Francis Sherman Echols. See page 50.

The Society appropriated \$12.00 for stenographic work for the Recording Secretary.

Dr. W. H. Atkinson showed a double monster, Filipino, boys, 11 years old, a pygopagus. Dr. J. H. Selby showed x-ray negatives of the band connecting the boys. Discussed by Drs. Glushak, W. P. Carr, Kober, D. S. Lamb, Gannon and Atkinson.

Dr. T. M. Foley read a paper entitled Preservation of the Function of the Hand after Gun-shot Injury to Nerves; observations made in British hospitals. Discussed by Drs. W. P. Carr, Kerr, T. A. Williams, Glushak and Foley.

WEDNESDAY, APRIL 9.—President Morgan presided; about 45 members present.

The following resolution was recommended by the Executive Committee:

WHEREAS it may be advisable to place all preparations containing narcotics under the narcotic regulations, and

WHEREAS the present regulations are ineffective,

Therefore be it resolved, That our delegate to the House of Delegates, American Medical Association, be instructed to present the matter to his associates with the recommendation that the members of the House of Delegates, A. M. A., bring the matter of the narcotic regulations before their State Associations with the view of obtaining needed changes in the regulations, which should however in no way impair the intent of the act.

After much discussion the resolution was referred back to the Executive Committee.

On motion of Dr. Nichols, the Society ordered that a Smoker be held; the following committee was appointed: Dr. Boswell, Chairman; Drs. W. P. Carr, Verbrycke, J. B. Nichols and A. Frances Foye.

Dr. J. M. Moser reported a case of Influenza in a child, complicated with quartan malaria. Discussed by Drs. Frank Leech, Nichols, W. C. Fowler, L. Tayler-Jones and Moser.

Dr. C. W. Richardson presented a report on results of the activities of the Section of Defects of Hearing and Speech, Division of Reconstruction, U. S. Army. A rising vote of thanks was given by the Society.

WEDNESDAY, APRIL 16.—President Morgan presided; about 45 members present.

Dr. Boswell for the Committee on Smoker, reported progress.

Dr. Davidson, for the Building Committee, reported that twelve per cent of the required building fund had been subscribed.

Dr. J. W. Lindsay, for the Committee on Contagious Diseases, reported that as instructed by the Society he had conferred with the Health Officer, who had accepted the following proposals: 1, That a positive culture be considered as equivalent to the report of a case of diphtheria; and 2, That the terminal inspections and cultures in cases of scarlet fever and diphtheria be performed by Health Department Inspectors. A third proposal, that recovery cards for the minor contagious diseases be no longer required, could not be accepted, because of the requirements of existing law.

The Society approved the report.

Dr. S. L. Owen called attention to the prompt, effective and willing work of the Red Cross Motor Service during the past winter, and inasmuch as the organization had been of great help to the physicians of the District, moved that a vote of thanks by the Society be given to the Service. Adopted.

Dr. D. S. Lamb made some remarks on Monsters, illustrated with many photographs.

Dr. W. D. Tewksbury read a paper entitled Pulmonary Sequelæ of Influenza. Discussed by Drs. Gerry Morgan, Schreiber, Chipman, J. D. Thomas, R. D. Adams, Selby, Kober and Tewksbury.

WEDNESDAY, APRIL 23; President Morgan presided; about 40 members present.

Dr. Wm. P. Reeves reported a case of Traumatic epilepsy. Discussed by Drs. W. P. Carr, Gannon, Lind and Reeves.

Dr. C. S. White reported a case of Fracture-dislocation of the head of the humerus, and presented the patient. Discussed by Drs. Chappell, Isabel H. Lamb, Foley, W. P. Carr, Hemler and White.

WEDNESDAY, APRIL 30; Smoker at the Wardman Park Hotel; about 175 members and others present. The regular order of business was omitted.

President Morgan called the meeting to order. The members and guests were seated at tables for the supper. Dr. John B. Deaver of Philadelphia addressed the Society on "The importance of early recognition of the diseases of the biliary passages." Afterwards he urged the importance of the District Medical Society owning a home, and of supporting the efforts being made towards that end. He was given a rising vote of thanks.

Drs. Davidson, Nichols, Foye, W. P. Carr, C. W. Richardson and Gerry Morgan also spoke on the various phases of the building project. Dr. Chas. Martin made an address on "Cows' tails and their relation to science and art."

WEDNESDAY, MAY 7; President Morgan presided; about 75 members present.

The resignation of Dr. Franzoni as Treasurer was received and accepted. The Corresponding Secretary was instructed to write Dr. Franzoni a letter expressing the deep appreciation of the Society of his long and faithful service, and its profound regret that his physical disabilities had made it seem expedient to him to resign his office. It was also ordered that at the next meeting an election should be held to fill the office.

The following applications for active membership were received and referred: Nelson Gapen, Georgetown University, 1900; Henry Gilbert Hadley, George Washington University, 1917; David Edward Horrigan, Georgetown, 1918; Roy Thomas Morris, G. W. Univ., 1907; George Henry Rowson, G. W. Univ., 1918; Herbert Hermann Schoenfeld, G. W. Univ., 1918.

Dr. Davidson, for the Building Committee, reported that the committee desired to begin building in September, and accordingly a drive would be begun at once to raise the needed funds. Several important contributions were announced.

In reply to a letter from the Secretary of the A. M. A., asking what the Society had done for the relief of aged or infirm physicians or their families, and what it was doing to assist physicians to reestablish themselves after release from the military service, the Secretary of the Society was instructed to say that the Society had made no rule in regard to aged and infirm physicians, and to the second inquiry, that the Society had adopted a resolution May 23, 1917, a copy of which the Secretary would send.

The Society also ordered that the forms of report in contagious diseases, that had been adopted by the Health Department in accordance with the recent conference between the Health Officer and the Committee on Contagious Diseases, should be published in the ANNALS.

The following were elected to active membership: Harry Saul Bernton, Harvard Medical School, 1908; Jerome F. Crowley, Georgetown University, 1918; Charles Daniel Easton, Harvard, 1904; Joseph Douglas McCue, Coll. Phys. and Surg., Boston, 1910; Ernest Luther Morgan, Johns Hopkins, 1912; Leo Brison Norris, Georgetown Univ., 1917; Roy Lyman Saxton, Georgetown, 1918; Roy Anson Thornley, Georgetown, 1914; Geoffrey Williams, Coll. Med. Evangelists, 1916.

To Associate membership: Knud Knud-Hanson, Municipal Physician, St. Thomas, Virgin Islands.

Dr. J. M. Richmond of El Paso, Texas, described the campaign of the El Paso Medical Society towards erecting a home.

Dr. (Captain) J. F. Wallis addressed the Society on "Several types of eczema." Illustrated by wax models made by himself.

Dr. (Lt. Col.) N. B. Foster read the paper of the evening, entitled "Acidosis."

WASHINGTON MEDICAL ANNALS

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Editorial.

PUBLICATIONS OF THE MEDICAL SOCIETY AND ASSOCIATION.—In view of the prospective erection of a building as a home for the Medical Society it becomes desirable to make a collection of the publications of the Society and Association, for deposit in the new building. It is hoped, therefore, that members will bear the subject in mind and, as opportunity offers, get together such publications as they may have and turn them over to the Committee on History of the Society, of which Dr. I. S. Stone is Chairman.

CENTENNIAL NUMBER OF THE ANNALS, January, 1918.—Extra copies at 20 cents a piece may be obtained from the Chairman of the Committee on Publication, Dr. D. S. Lamb.

HISTORY OF THE MEDICAL SOCIETY OF THE DISTRICT OF COLUMBIA.—Price \$1.00, with 25 cents added if delivered in this city or sent by mail. Address Dr. E. G. Seibert, 1545 I Street, N. W. The books are in the custody of Dr. D. S. Lamb, at the Army Medical Museum.

BACK NUMBERS—Members of the Society who have back numbers of the ANNALS, and do not intend to preserve them, are requested to send them to the Chairman of the Publication Committee. Requests for such numbers are frequently received.

THE OTHER MEDICAL SOCIETIES OF THE DISTRICT OF COLUMBIA.

In the January number of the ANNALS the following notice was published: "It is believed that several of the following societies are no longer in existence. The Secretary of each society therefore is requested to send to the Editor the desired information as soon as practicable after the mailing of this number."

So far the only response to this notice is the following:

Washington Society for Nervous and Mental Diseases; has a membership limited to 30, and meets on the third Thursday of the month, usually at the University Club. The officers for 1919 are: President, H. T. A. Lemon; Vice President, John E. Lind; Secretary-Treasurer, J. P. H. Murphy.

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In accordance with a recent conference between the Health Officer and the Committee of the Medical Society on Contagious Diseases, the following revised forms were agreed on :

HEALTH DEPARTMENT OF THE DISTRICT OF COLUMBIA.

Please examine Culture for Diphtheria from the following-named person :

Date, ———. Time, ———. Name of Patient, ——— ———.
 Age, ——— Yrs.; ——— Mos.; ——— Days. Sex, ———.
 Color, ———. Location (street and number), ———
 Other address of patient, if any, since onset of disease, ———.
 Name of school attended by patient, ———
 Primary culture, ———. Secondary culture, ———.

It is understood and agreed that in event of the finding of diphtheria bacilli in the accompanying specimen, this memorandum is to be regarded as the report of the case as one of diphtheria required by law.

Physician's signature——— M.D.

Address———.

Telephone call,———.

See Directions for Making Cultures on reverse side of Blank.

HEALTH DEPARTMENT OF THE DISTRICT OF COLUMBIA.

Directions for Making Cultures.

Place the patient in a good light, depress the tongue, and rub the swab gently but freely upon the exudate, or if none be visible, upon the mucous membrane of the pharynx and tonsils. Without laying down the swab, withdraw the cotton plug from the culture tube, insert the swab, and rub that part of it which has touched the exudate or mucous membrane against the serum, being careful not to break the surface. Put the swab back into its own tube and plug both tubes. Send it, as soon as possible, to the Health Department, where it will be received at any hour.

The boxes must be returned to the Health Department within three days after issue, whether they have or have not been used.

If any germicide has been applied to the throat or nose, wait at least 12 hours before taking the culture.

Tubes delivered before 8 o'clock P. M. will be examined and results reported the following morning.

Culture tubes must not be used if they are dry, or after the date stamped on the tube.

It is recommended that a culture be taken from the nose as well as the throat. An additional swab is provided for this purpose.

REPORT OF RECOVERY.

H. D. Case No.,———. Name of Disease,———.

Washington, D. C.,———, 19——.

Name of Patient,———. Residence,———.

I hereby certify that the clinical manifestations of the disease have now passed. The Health Department is, therefore, requested to assume all further responsibility for the release from quarantine of the patient above referred to.

——— M.D.

NOTE.—No person shall certify knowingly or negligently that any patient has recovered from Diphtheria, Scarlet Fever, Measles, Whooping Cough, Chicken-pox, Epidemic Cerebro-

Spinal Meningitis, or Typhoid Fever, until such patient is in such condition as to be free from danger of communicating the disease from which he is suffering to other persons. Act of February 3, 1907.

If no physician be in attendance, a report of recovery must be made by the person in charge of the case, as soon as the patient is free from danger of spreading disease.

MARRIAGES.

Dr. (Major) Frank Leech, Med. Corps, U. S. A., Feb. 9, 1919, at Greenville, S. C., to Myrtle Adele Tatum, daughter of Mr. and Mrs. W. J. Tatum.

Dr. (Captain) W. B. Marbury, Med. Corps, U. S. A., April 2, 1919, to Violetta Carroll Mercer, both of Washington.

Dr. Lyle Wm. Mason to Evelyne Wailes Brewer, March 19, both of Washington.

DEATHS.

Martha Elizabeth Donnally, wife of Dr. Williams Donnally, and mother of Dr. H. H. Donnally, died in this city March 12.

Dr. Ellis B. Bliss, son of the late Dr. and Mrs. D. W. Bliss, brother of Dr. Clara Bliss Finley, died at Maplewood Sanatorium, Silver Spring, Md., Jan. 6.

Major Clarence Ewen, M. C., U. S. A. (retired), died in this city Jan. 6.

Dr. Henry D. Fry died May 12, at his residence, 2024 R. St., N.W. Buried from the Church of the Epiphany. An obituary notice will be published.

Mrs. Fannie Nelson Gapen, mother of Colonel Nelson Gapen, M. C., U. S. A., died at Cleveland, Ohio, May 8. Buried from her son's residence, 1757 Lanier Place, at Rock Creek Cemetery.

Claudius Barton Little, son of Dr. and Mrs. J. W. Little, died March 15. Buried from his parents' residence, 1313 14th St., N.W.

Dr. Wm. E. Poulton died Feb. 14, in his 80th year. Buried from his son's residence, 1108 Monroe St., N.W.

Dr. Z. T. Sowers died April 23, at his residence, 1707 Mass. Av., N.W. An obituary notice will be published.

RECENT PUBLICATIONS BY PHYSICIANS OF THE DISTRICT OF COLUMBIA.

R. D. Adams and C. H. Montgomery; Physical signs and their mechanism in acute pulmonary inflammation; *Jour. A. M. A.*, April 5, 1917.

B. K. Ashford, U. S. A.; Preparation of medical officers of combat divisions in France at theater of operations; *Mil. Surg.*, February, 111.

Pearce Bailey, U. S. A.; War neuroses, shell shock, and nervousness in soldiers; *Jour. A. M. A.*, Dec. 28, 1914.

W. D. Bigbee; Problems of canning; *Amer. Jour. Pub. Hlth.*, April, 1913.

W. A. Bloedorn, U. S. N.; Drug addiction; *Jour. A. M. A.*, Jan. 25, 1912.

Rupert Blue, P. H. S.; Epidemic influenza and United States Public Health Service; *Modern Hosp.*, Dec., 1913.

J. W. Bovée; Gynecologic pelvic drainage; *Jour. A. M. A.*, Jan. 18, 1912. Also, Tubal and ovarian hemorrhage; *Surg. Gynec. and Obst.*, Feb., 1912.

J. F. Brewster and C. L. Alsberg; Determination of distribution of nitrogen in certain seeds; *Jour. Biol. Chem.*, March, 1912.

R. E. Buchanan; Favus herpeticus or mouse favus; *Jour. A. M. A.*, Jan. 11, 1912.

G. E. Bushnell, U. S. A.; Experimental evidence as to immunity from tuberculosis infection; *Med. Record*, N. Y., Jan. 18, 1912. Also, Tuberculosis bacteremia and massive exogenous tuberculous infection in man; *Ibid.*, March 15, 1912.

C. F. Craig, U. S. A.; The Wassermann test, 239 pages; St. Louis; Mosby Co.; review in *Jour. A. M. A.*, Feb. 1, 1912.

J. A. Delano; Mobilizing nurses of America for peace; *Florida Med. Assn. Jour.*, February, 1912.

A. G. DuMez; Increased tolerance and withdrawal phenomena in chronic morphinism; *Jour. A. M. A.*, April 12, 1912.

W. G. Erving; Orthopedic treatment of nerve lesions; *Amer. Jour. Orthop. Surg.*, October, 1912.

E. A. Fennel, U. S. A.; Prophylactic inoculation against pneumonia; *Jour. A. M. A.*, Dec. 28, 1911.

J. A. Foote; Medicine fakes and fakery of all ages; *Nat. Geograph. So.*, January, 1912.

S. I. Franz; Rehabilitation and reëducation, physical, mental and social; *Mental Hygiene*, January, 1912.

B. Glueck; Psychiatric aims in field of criminology; *Ibid.*, October, 1912.

E. S. Hamblen; Public Health and Child Hygiene; *New Jersey Med. Soc. Jour.*, April, 1912.

H. H. Hazen; Cases of multiple disseminated lupus vulgaris; *Jour. Cutan. Dis.*, February, 89. Also, More intensive form of arsphenamin therapy; *Amer. Jour. Syph.*, October, 778. Also, Roentgen-ray treatment of skin cancer; *South. Med. Jour.*, February, 87.

R. H. Ivy; Case of plastic repair of nose by means of doubly epithelialized flap from face; *Annals Otol. &c.*, December, 1225.

C. J. Kempf; The autonomic functions and the personality; pp. 156; price \$2.00. Review in *Jour. A. M. A.*, March 15, 819.

J. W. Kerr; P. H. S.; Public Health administration in New Mexico; reprint 490, *P. H. Reports*, Nov., 15.

J. C. Lathrop; Income and infant mortality; *Amer. Jour. Pub. Hlth.*, April, 270.

M. E. Lent; Public Health nursing in extracantonment zone; *Ibid.*, March, 193.

E. Linton; Scientific medicine, what is it and what is it not; *Tenn. State Med. Assn. Jour.*, February, 385.

M. W. Lyon, Jr., U. S. A.; Gross pathology of epidemic influenza at Walter Reed Hospital; *Jour. A. M. A.*, March 29, 924. Also, Intestinal parasites during a year at Walter Reed Hospital; *Ibid.*, Feb. 1, 326. Also, Nomenclature of human isohemagglutination groups; *Ibid.*, April 19, 1134.

L. McAfee; Epidemic influenza in the medical and surgical history of the civil war; *Ibid.*, Feb. 8, 445. Also, Medical and surgical history of American participation in European war; *N. Y. Med. Jour.*, Feb. 15, 268.

C. C. McCulloch, U. S. A.; Coat of arms of medical corps; *Texas State Med. Jour.*, April, 382.

A. MacDonald; Anthropometry of soldiers; *N. Y. Med. Record*, Dec. 14, 1023.

W. J. Manning; Craniocerebral roentgrammeter; *N. Y. Med. Jour.*, April 19, 677; abstract in *Jour. A. M. A.*, May 3, 1328.

E. K. Marshall, V. Lynch and F. W. Smith; Mustard gas; *Jour. Pharm. and Exper. Therap.*, December, 265 and 291.

E. M. Medlar, U. S. A.; Effect of typhoid lipovaccine in increasing susceptibility to other diseases; *Jour. A. M. A.*, Dec. 28, 2146.

E. L. Munson, U. S. A.; The needs of medical education as revealed by the war; *Ibid.*, April 12, 1060.

J. A. Murphy, U. S. N.; Naval transportation of army sick and wounded overseas; *Mil. Surg.*, February, 178.

H. S. Newcomer; Absorption spectra of acid hematin, oxyhemoglobin and carbon monoxid hemoglobin; *Jour. Biol. Chem.*, March, 465.

H. J. Nichols and C. O. Stimmel, U. S. A.; Pneumobacilli as complicating organisms in influenzal pneumonia; *Jour. A. M. A.*, Jan. 18, 174.

W. O. Owen, U. S. A.; Illuminated trap for night-flying insects; *N. Y. Med. Jour.*, April 5, 590. Also, Legislative and administrative history of medical department U. S. Army, during Revolutionary period, 1776 to 1786; *Amer. Med. Hist.*, Dec., 1917, 342. Also, Teaching surgery by moving pictures; *N. Y. Med. Jour.*, Feb. 8, 229.

C. C. Pierce, P. H. S.; Problem for nation-wide control of venereal diseases; *South. Med. Jour.*, March, 130.

F. L. Pleadwell, U. S. N.; Relation between foecal infection and arthritis; *Jour. A. M. A.*, March 15, 817.

H. M. Pollock and E. M. Furbush; Annual census of insane, feeble minded, epileptics and inebriates in institutions in United States, Jan. 1, 1918; *Mental Hygiene*, January, 78.

B. H. Ransom and W. D. Foster; Life history of ascaris lumbricoides; *Jour. Parasit.*, March, 93.

F. H. K. Reynolds; A simple method for defibination of blood; *Jour. A. M. A.*, April 12, 1075.

A. D. Rood; Clinical study of influenzal pneumonia; *N. Y. Med. Jour.*, March 22, 493; abstract in *Jour. A. M. A.*, April 5, 1033.

G. B. Roth; A combined measuring and injecting pipette; *Jour. Laborat. and Clin. Med.*, March, 369.

L. P. Shippen; Toxic formation by variety of B. Botulinus when cultivated aerobically under various conditions; *Arch. Inter. Med.*, March 15, 346.

R. W. Shufeldt, U. S. A.; Allen's method of reshaping tool handles for cripples, &c.; *N. Y. Med. Record*, Feb. 15, 269. Also, Balsam Saint Rocco, a new biological preserving fluid; *Museum Work*, March, 179. Also, Suggestions for National Museum of Medicine; *N. Y. Med. Record*, March 22, 482.

S. A. Silk; Problem of pulmonary tuberculosis in psychiatric hospital; *Amer. Jour. Insan.*, January, 393.

C. A. Simpson; Kromayer lamp and colloidal sulphur in treatment of post influenzal alopecia; *N. Y. Med. Record*, March 8, 402.

J. W. Smith, U. S. A.; Reaction of leucocytes after vaccination with army triple typhoid lipovaccine.

G. A. Soper; Epidemics after wars; *Jour. A. M. A.*, April 5, 988.

H. F. Stoll and Lester Neuman; The complement fixation test in the diagnosis of tuberculosis; *Ibid.*, April 12, 1043.

I. S. Stone; Standardization of rural hospitals; *Jour. New Jersey Med. Soc.*, February, 68. Also, in *Jour. A. M. A.*, Jan. 18, 219.

Edgar Sydenstricker, G. A. Wheeler and Joseph Goldberger, P. H. S.; Disabling sickness among the population of seven cotton mill villages of South Carolina in relation to family income, Reprint 492, *P. H. Reports*, Nov. 22.

A. Thompson; Public health and venereal diseases; *Modern Hosp.*, February, 129.

E. R. Whitmore, U. S. A.; Lipovaccines; *Jour. A. M. A.*, Jan. 4, 66.

W. H. Wilmer, U. S. A.; Eye and aviation; *Arch. Neurol and Psych.*, February, 162.

Chas. Wolf and E. G. Breeding, U. S. A.; Hysterical aphonia associated with latent syphilis; *Jour. A. M. A.*, March 1, 639.

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Merrill, Walter H.
Mess, William A.
Miller, G. Brown
Miner, Francis H.
Mistretta, Ferdinand H.
Mitchell, J. Ernest
Moran, John F.
Morgan, Edwin L.
Morgan, James D.
Morgan, William Gerry
Morris, George G.
Moulden, William R.
Muncaster, Steuart B.
Mundell, Joseph J.
Neuman, Lester
Nevitt, J. Ramsay
Newgarden, George J.
Nichols, John B.
O'Malley, Mary
Owen, William O.
Owens, S. Logan
Patten, William F.
Perkins, W. Robert
Pfender, Chas. A.
Polkinhorn, Henry A.
Poole, Thomas A.
Prentiss, D. Webster.
Prosperi, Milton H.
Randolph, Buckner M.
Reede, Edward H.
Reeves, William P.
Rench, Victor B.
Richardson, Chas. W.
Richardson, James J.
Riggles, John L.
Rives, William C.
Rogers, Joseph D.
Roman, Frederick O.
Roy, Philip S.
Ruedy, Robert C.
Ruffin, Sterling
Rule, Amy J.
Russell, Murray A.
Savage, Linnaeus S.
Schreiber, H. R.
Seibert, Edward G.
Sexton, R. Lyman
Shands, Aurelius R.
Shute, D. Kerfoot
Simpson, C. Augustus
Simpson, J. Crayke
Skinner, J. O.

Snyder, Arthur A.	Vale, Frank P.
Sprigg, William M.	Valentine, Aloysius W.
Stanley, A. Camp	Vaughan, George Tully
Stavely, Albert L.	Verbrycke, J. Russell, Jr.
Stewart, John W.	Walker, Reginald R.
Stone, Isaac S.	Walsh, John E.
Stoutenburgh, John A.	Walter, William F.
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Taylor-Jones, Louise	Wharton, John J.
Taylor, Eugene A.	White, Chas. Stanley
Taylor, Lewis H.	Wilkinson, Oscar
Tewksbury, Wm. D.	Wilmer, William H.
Thomas, Ada R.	Wood, George W.
Thomas, William J. G.	Woodward, William C.
Thompson, J. Lawn	Yates, Frederick
Titus, Elijah W.	Young, William G.
Trimble, Robert S.	

LETTER OF THE PRESIDENT OF THE MEDICAL
SOCIETY OF THE DISTRICT OF COLUMBIA
TO THE MEMBERS.

Washington, D. C., May 15, 1919.

My Dear Doctor:

The project for providing a Home for the Medical Society of the District of Columbia has advanced more rapidly than had been expected. The lot has been purchased and completely paid for, at a cost of about \$15,000. The plans for the building have been prepared and the architect engaged. It is now purposed immediately to raise the amount required to erect the building, approximately \$75,000, and proceed with its construction forthwith. Although some generous contributions have been promised from outside parties, the bulk of this sum must be obtained by donations from the members of the Society. It is the object of this communication to solicit your contribution to this project and to assist you in forming a decision as to the extent of your participation in it.

The sum of \$75,000 divided among the (approximately) 500 members of the Society would necessitate an average contribution of \$150 from each. The donation of such an equal amount by each member would, however, probably be more burdensome and inequitable than contributions proportionate to income. Assuming the average annual income of our members to be \$3,000 each, the aggregate annual income of all the members of the Society

would amount to about \$1,500,000. Of this sum \$75,000 constitutes 5 per cent. Consequently, if each member contributed 5 per cent of his income for one year the sum required for the building would be readily raised.

These calculations will afford some guidance to members desiring to contribute their due share to this undertaking; \$150 will constitute a good average donation; or 5 per cent of the annual income, especially from those of larger means. These sums are not excessive, and could be readily made up, if necessary, by some slight economies. No time could be more propitious than the present for collecting this fund. The recent past has been a season of unexampled prosperity for the physicians of Washington; the enforced and voluntary economies of the war have promoted the accumulation of funds; and the habit of giving to public causes has been formed. It is not likely that a time will again come when we can more conveniently spare the amounts needed for the present purpose.

There are many cogent reasons why every physician should further and participate in the activities of a Society such as ours—personal financial advantage, the strengthening that comes from organization and teamwork, our personal edification, intellectual gratification, the pleasures and stimulations that come from social intercourse, the spiritual satisfaction of participating in the functions of an honorable and noble profession. There is far greater recompense possible in the practice of medicine than the mere making of money. No experience of the human soul is more noble than spiritual satisfaction. It is this that fires the martyr, this that is the high reward of the soldier who ventures all for humanity. Our colleagues who recently surrendered all for their country's service will experience a joy abiding through life and worth far more than their monetary loss. We can derive a measure of this higher satisfaction by engaging in the fullness of professional life and striving to vivify our own professional environment. A concrete opportunity is now presented to us of gaining some of this spiritual gratification, by co-operating in our building enterprise; and the greater the sacrifice we make in its behalf the greater will be our self-satisfaction and pride at having had a creditable share in our beautiful Home when completed.

Every member of the Society is therefore earnestly urged to contribute, generously, to the building fund. It is desired that the subscriptions be settled by September 1, next, either by cash payment in full, or by payment of part (at least one-half) in cash and the balance in promissory notes. Checks and notes should be made payable to the Treasurer of the Society, Dr. E. G. Siebert, and sent either to him or to Dr. E. Y. Davidson, Chairman of the

Building Committee. Unless previously heard from, each member of the Society will in the near future be visited by a member of the Building Committee in behalf of this project.

Now then, all together, and with a little enthusiastic self-sacrifice and generosity we will be occupying our new Home within a year.

Cordially,

WM. GERRY MORGAN.

P. S.—Treasurer's address: Dr. E. G. Seibert 1545 Eye Street, N. W.

THE NEW BUILDING.

What of the building project? What, rather, is your relation to it? Are you one of the few who do not support it, or, if you support it, have you supported it to the extent of your ability? Have you done *a* part or have you done *your* part in supporting the building project? The letter by the President of the Society dated May 15, 1919, published herewith, "will assist you in forming a decision as to the extent of your participation in it." When the building is completed nothing can take away from you the spiritual satisfaction of having done your part.

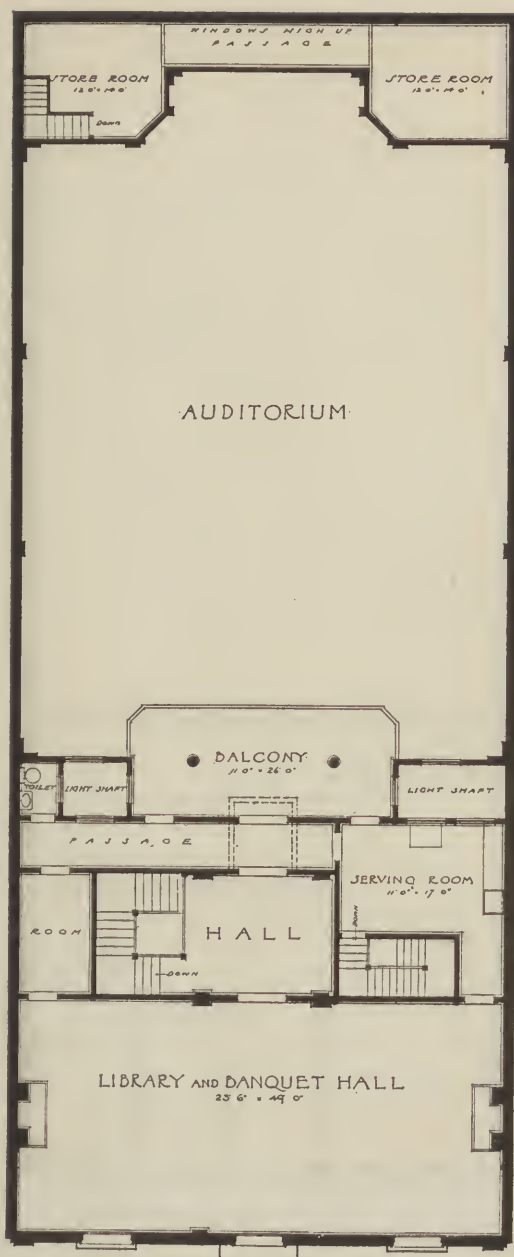
The cost of the building project is \$90,261. The lot cost \$15,261, and has been fully paid for; and the estimated cost of the building is \$75,000. Of the total amount, \$52,000 have been subscribed. The remaining \$38,261 will be raised and the building will be erected. Of this there is no doubt. The Society is committed to the project and it has gone too far to recede. Ground will be broken this fall and our home pushed to completion.

Above are the names of the members of the Society who have contributed to the building fund. The members who have not given to the extent of their ability will give more. Some will give until the giving hurts.

E. Y. DAVIDSON,

Chairman Building Committee.

May 30, 1919.



· PLAN OF SECOND STORY.



PLAN OF BASEMENT.

WHY WE SHOULD BUILD A HOME FOR THE MEDICAL SOCIETY.

I am afraid that there are few of us who realize the great value of a good, live medical society to all its members, and to the community as well. And the reason many do not realize it is because they have not thought of it. If I can make the members think of it seriously they will see it as plainly as I do, and there will be no difficulty about having a building erected this year.

We have a good Society now, but we should have a much better one. We are, or should be, ashamed of our shabby housing, and should feel enough pride in our Society to set the pace for other cities in this respect, as we have done in scientific work and education.

Let us consider, first, what good such a Society will be to us and, secondly, how a building will help make it. Our Alma Mater gives us a diploma, and sends us out in the world to practice our profession, equipped with a certain amount of knowledge and some experience. Let us say, for courtesy, that we are equipped with vast knowledge and no little experience. If we rest at that, how much will that knowledge avail us a year or two later? Most of it, that we have not forgotten, will have become obsolete. Dr. W. W. Keen, the noted surgeon, some years ago, took a year's vacation for European travel and relaxation. When he came back to work he said he found such advances had been made that he was way behind the procession, and felt as if it would take hard work for the rest of his life to catch up. And this was no great exaggeration. Most of us, when we fall behind in any one particular, never catch up in that particular thing.

Constant vigilance and constant study are necessary for the man who keeps fit to practice modern medicine, or any of its specialties. And, indeed, medicine today is a group of specialties and we do well to keep in the front rank of any one of them. Even to do this we must keep well informed, at least in a general way, on all other specialties. We may not need to know the finer details of each, but must keep informed as to the latest and best methods of diagnosis and treatment as they come out each year, and be able to judge when and how we may use, or have used for us, the best in each field of work. For all the specialties are interlocked and interdependent.

There are specialties within specialties. One internist is particularly good in certain, restricted lines—another in other lines. One surgeon is specially skilled in certain work—another in a different class of cases. We must know something of each specialty, and of each specialist, in order to get the best results

for our patients and incidentally for ourselves. Can we get this knowledge from reading? From occasional attendance on clinics? From consultations with men about whose work we know nothing? One may study and read to the neglect of his practice, and to the injury of his eyes and nerves; but he cannot acquire such intimate knowledge of men and methods except through his medical society.

Nothing new of importance comes out in the year that is not presented in our Society while it is fresh and long before it gets into text books or even journals. It is usually presented in a clear and concise manner vastly more impressive than reading. It is further elucidated by discussion. One gets it from various angles, gets the consensus of opinion on it, and is better able to remember it, better able to judge whether he can use it to advantage, or have it used, and if so, by whom.

If our college was our Alma Mater, our Medical Society can surely be called our *Alma Pater*. Our foster father, who continues to supply us with help and with many kinds of ammunition for the fight of life, long after the mother has turned us loose to shift for ourselves. It is our post graduate school, and the tuition fees are very small.

How much more impressive it is to hear an authority talk to us about his work, his discoveries, and his experiences, than to read his book. We get the benefit of his personality which makes us remember his subject. We can judge the man, whether to believe all he tells us or not. We may ask him questions or for concrete illustrations on doubtful points. We usually see many photographs or moving pictures of his work. We hear his paper discussed, and often our views are materially changed by the discussion, which would not be the case if one laboriously read up on the subject in a paper or book. We may decide that the subject is not worth further study and save ourselves much labor, or may deem it of such importance that we will pursue it further in many ways, and finally practice it to our advantage and that of our patients. But whether a new thing is good or not we *must* know something about it; enough to judge whether we need it or not.

How can we get such first hand knowledge except in our Society? How can we get it so *easily* and so *quickly* and so *pleasantly*, and where else can we get the views of so many of our associates upon it?

And to get the best men and best papers we must have a live Society. But this is only a small beginning of the good we should personally derive from this Society.

Contact with our associates here and the hearing and participating in discussions makes us *think*, and my old professor of anatomy used to say, "If I can only make you *think*, I have

no fear for your scientific future." There is much truth in that remark. A thinking man is going to make a success of anything he undertakes.

Our Society is our *intellectual gymnasium* as well as our tremendously valuable source of knowledge. Men form clubs and erect fine buildings for gymnasiums for the improvement of their muscles. We should erect a suitable building for our intellectual "gym." If we use it properly it will sharpen our wits, make us vastly more ready and capable in coping with unusual and unexpected complications. It will lead to the saving of some valuable lives and incidentally to the saving of some grateful patients, who will send us more patients and help the snowball of practice, as it rolls, to grow by leaps and bounds. This "gym" will improve our manners, our ease and impressiveness in the face of difficulties, our suavity and personal attractiveness to our patients; and we all know what this means financially as well as scientifically.

A thinking man, a quick ready tactful man, a man with pleasing and attractive manners is bound to get patients. So the "gym" will repay us over and over for any money we put in it in this way alone. And there are many other ways, as I shall endeavor to show, in which it will help us financially. It is a good investment, particularly to the young man who has still a practice and a reputation to establish. But in order to get these benefits we must use our Alma Mater properly. We cannot expect him to shower us with good things if we neglect him. We must build him a house, attend regularly, read papers, take part in discussions, work on committees, and in every way take an active interest in our profession through our Society. We owe this to our Society and to our profession. Let us not get too far away from the teachings of grand old Hippocrates, who taught us above all things kindness and honor. Honor to ourselves and to our profession and the great debt of gratitude we should feel to those who taught us.

Nothing can teach us more or do more to promote the dignity and honor of our profession than a good Medical Society. And nothing can so promote kindly feeling and fair dealing among its members. We should take advantage of the great opportunities it offers us, set aside one night a week religiously, and never miss a meeting unless it is really impossible to come. If we get the habit of coming we will *enjoy* every meeting, and we cannot fail to feel a deep obligation to promote its welfare and the dignity and honor of our profession in every possible way. We shall cease to live selfishly to ourselves and become better doctors, better citizens and happier in feeling that we are of use in the world.

To come back to selfish motives, we know that the Society is the great legitimate field of advertising for the specialist. And we are all specialists today, whether we practice internal medicine, surgery, otology, ophthalmology or any other branch of medicine.

Indeed internal medicine and surgery are such big specialties that they are already divided into many subdivisions. And this Society is our legitimate field for showing what we are doing—what we are experts in doing. It is a mutual benefit to us all. And the larger the audience the greater incentive to advertise our work. Personally I never read a paper before this Society on any of my surgical work that I did not get from it at least two or three paying patients. And if the audience had been larger I am sure I would have had more. So I am not altogether disinterested, I confess, in wanting a larger and more active attendance.

But the young man and the man who has fallen behind will say what use is it to him? He can't read papers and get patients. To such I would say, "You were never more mistaken in your life. To you of all others this Society is and will be of the greatest value provided you will *use* it." For a young man especially it is easy to establish a reputation. It is done before we know it, for good or for bad. I know many, *many* instances where one paper has *made* a young unknown man, with the result that patients came to him in surprising numbers. But I have known more who through laziness or timidity established a reputation of mediocrity or worse in an amazingly short time.

It is within the power of nearly every member of this Society, who is not already too busy, to make a reputation for himself *here* in our own Society that will result in his getting directly or indirectly many paying patients, and others that are not. But we have to take the milk to get the cream. But we must use it rightly. We must *work*. Learn to do something specially well. Anything we choose. Become really expert in some very limited field. And if we need material we will find that any of the numerous dispensary services are only too glad to get faithful workers, especially young men who are trying to become experts in some special work.

There is no excuse on the ground of lack of material if we are earnest and persistent—unless we choose for our specialty something like the diseases of Hottentots' wisdom teeth. But nothing is too small. One man became famous from his study of bats' teeth; a number from studying a little worm, the hook worm. And when one is expert in any little thing let him come and tell us about it. Give us the benefit of his knowledge and experience, and he will be famous over night, and he will get patients.

Nothing will tend more to good attendance than the interest one must feel in the building he has personally helped erect. Each one will come and get the habit of coming, will learn the value of coming, will become better acquainted and enjoy coming, and look forward to meeting his fellow members with pleasant anticipation. Better and more interesting papers will follow. Outside men will be glad to come and give us their best efforts. The comfort and convenience of the building will be an attraction. Men from the surrounding counties will be attracted, and will get the habit of sending patients here instead of to other cities. We will have an attractive, convenient and comfortable place for them to loaf while waiting for trains, etc. Goodfellowship will increase, misunderstandings will diminish, and in many ways solidarity of the profession will be promoted.

In all these ways our new home will do more than any other one thing to make Washington a real medical center. This was the dream of our late lamented Dr. W. W. Johnston. He had often spoken to me of it. Our home will get us together and teach us to know each other and to know that we have as good men in our Society in every branch of medicine as are to be found in any city of the world. We will stop damning each other with faint praise and give the hearty endorsement that is deserved. We will give the city better doctors, better sanitation, better hygiene, take our proper place in all civic matters and be more respected and honored by the public.

W. P. CARR.

The Medical Society of the District of Columbia.

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<i>First Vice-President</i>	ADA R. THOMAS.
<i>Second Vice-President</i>	A. R. SHANDS.
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<i>Corresponding Secretary</i>	J. RUSSELL VERBRYCKE, JR.
<i>Treasurer</i>	E. G. SEIBERT.
<i>Delegate to House of Delegates, American Medical Association</i>	G. WYTHE COOK.
<i>Alternate</i>	J. S. ROY.
<i>Vice President of Washington Academy of Sciences</i>	WM. GERRY MORGAN.
<i>Representative on National Legislative Committee of Council on Health and Public Instruction, A. M. A.</i>	L. B. T. JOHNSON.

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- To serve two years.*—J. A. GANNON, H. T. A. LEMON, W. P. CARR.
- To serve three years.*—A. W. BOSWELL, P. S. ROY, C. S. WHITE.
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Adams, Roy Delaplaine,	Stoneleigh Court.
Adams, Samuel Shugert, <i>A. M.</i> ,	1801 Conn. av., n. w.
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Atkinson, Wade Hampton,	1402 M, n. w.
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Bogan, Sam'l. Wm.,	
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Bovée, John Wesley,	The Rochambeau.
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Brady, Zadoc M.,	Kenilworth, D. C.

* Members are requested to report errors in name or address and changes of address to the Committee on Publication, Corresponding Secretary, and Treasurer.

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Compton, Arthur George,	M. C., U. S. Army.
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Conklin, Rush West,	20th and R. I. av., n. e.
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Corley, Karl Coates,	1787 Columbia Road, n. w.
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Dixon, Taylor Boyd,	1516 R, n. w.
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Donnally, Harry Hampton, <i>A. M.</i> ,	1612 I, n. w.
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Downey, Alice Winans,	2473 18th, n. w.
Duehring, Frank Edward,	1008 M, n. w.
Duffey, Hugh Clarence,	929 O, n. w.
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Ellyson, Robert Maitland,	1120 13th, n. w.
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Erving, William Gage, <i>A. B.</i> ,	922 17th, n. w.
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Flynn, James Augustin,	1333 Q, n. w.
Foley, Thos. Madden,	1341 N. H. av., n. w.
Folkmar, Elnora Cuddeback, <i>M. Ph., D. S. S.</i> ,	1730 I, n. w.
Foote, John A.,	1726 M, n. w.
Foster, Romulus A.,	2207 Massachusetts av., n. w.
Fowler, Henry Atwood, <i>B. S.</i> ,	1621 Conn. av., n. w.
Fowler, William Charles,	1812 First, n. w.
Fox, William Henry,	1826 Jefferson Place.
Foye, Amelia Frances,	1118 13th, n. w.
Frankland Walter Ashby,	Fort Myer, Va.
Franklin, Edmund T. M.,	1729 19th, n. w.
Franzoni, Charles William, <i>Ph. B.</i> ,	605 I, n. w.
French, William J.,	The Cecil.
Frischkorn, Robert Walter,	1242 Newton, n. e.
Fuller, Homer G., <i>Ph. B.</i> ,	The Farragut.
Gannon, James A.,	1915 Biltmore, n. w.
Garnett, Alexander Y. P.,	The Wyoming.
Garrison, Fielding Hudson,	2532 13th, n. w.
Gibson, Frank Eugene,	927 I, n. w.
Gill, William T.,	442 M, n. w.
Glazebrook, Larkin White,	2022 P, n. w.
Gleeson, James Knox Polk,	1451 Harvard, n. w.
Glueck, Bernard,	
Glushak, Leopold,	1522 U, n. w.
Goodman, Wm. R.,	1332 12th, n. w.
Graham, Neil Ferguson,	909 New York av., n. w.
Gray, Augustus C.,	3720 N. H. av., n. w.
Greene, Louis Storrow,	1624 I, n. w.

Greene, Samuel H., Jr.,	1460 R. I. av., n. w.
Greene, Willard Parker,	
State Board of Health, Minneapolis, Minn.	
Grier, James Bradley,	109 4th, n. e.
Griffith, Chas. I.,	1371 Monroe, n. w.
Groff, Chester C.,	1107 I, n. w.
Groover, Thomas Allen,	1603 16th, n. w.
Guerra, Arturo Luis,	The Albemarle.
Gunion, John Paul,	605 Kenyon.
Gunnell, Francis M., U. S. Navy, Retired,	600 20th, n. w.
Gunning, Edward J.,	1210 Mass. av., n. w.
Gwynn, William Clarence,	1514 30th, n. w.
Haas, Carlton D.,	1121 Monroe.
Hagner, Francis Randall,	The Farragut.
Hall, Arthur Joseph,	625 I, n. w.
Hall, Custis Lee,	1624 I, n. w.
Hamilton, Ralph Alexander,	924 15th, n. w.
Hammett, Chas. Maddox,	1330 I, n. w.
Hammond, Thos. Victor,	1713 H, n. w.
Hardesty, Wm. S.,	The Wellington.
Hardin, Bernard Lauriston, B. S.,	1311 Conn. av., n. w.
Harding, Harry Theodore,	2750 14th, n. w.
Harrison, Bernard Hooe,	919 L, n. w.
Hart, James Wm.,	2156 F, n. w.
Hasbrouck, Edwin Marble,	4909 14th, n. w.
Haysmer, Elam Dolphus,	Sanatorium, Hastings, Neb.
Hazen, Henry H.,	1621 Conn. av., n. w.
Hazen, W. P. C.,	511 East Capitol.
Heiberger, Ida Johanna,	Conn. and Florida avs.
Heinecke, George Burton,	5634 Georgia av., n. w.
Heitmuller, Geo. H., A. B.,	1333 N, n. w.
Heller, Joseph Milton,	The Marlborough.
Hemler, Wm. Francis,	1330 East Capitol.
Henning, Samuel Carl,	The Rochambeau.
Hickling, Daniel Percy,	1304 Rhode Island av., n. w.
Higgins, Daniel Witter,	314 East Capitol.
High, Daniel Lee,	The Victoria.
Holden, Raymond Thos.,	3111 16th, n. w.
Holmes, Mary,	227 1st, n. e.
Hooe, A. Barnes,	1220 16th, n. w.
Hooe, Robert Arthur,	The Burlington.
Hornaday, Frank A.,	3509 14th, n. w.
Hornbrook, Frank Wheeler,	1836 Connecticut av., n. w.
Hough, James Spencer,	Fort Oglethorpe, Ga.
Hough, William Hite, <i>Phar. D.</i> ,	1801 K, n. w.
Howard, Stanton Wren,	1945 Calvert, n. w.
Hume, Howard,	1830 Jefferson Place, n. w.
Hummer, Harry Reid,	Canton, S. D.
Hunter, Montgomery,	1728 P, n. w.
Hunter, Oscar Benwood,	2021 H, n. w.
Huntington, Wm. Henry,	1624 I, n. w.
Hurt, Harry,	1524 P, n. w.
Hyatt, Franck,	The Rochambeau.
Hyde, Chas. Wilbur,	The Alabama.
Hynson, Lawrence Maxwell,	1335 N, n. w.
Jack, William Alexander, Jr.,	1918 Biltmore, n. w.
Jackson, Virgil B.,	The Brunswick.
Jaeger, Henry W.,	424 East Capitol.

Jeffries, Joseph Arthur, Jr.,	901 20th, n. w.
Jenner, Norman Richards,	1110 Rhode Island av., n. w.
Johnson, Joseph Taber, <i>A. M., Ph. D., LL. D.,</i>	Cosmos Club.
Johnson, Loren Bascom Taber,	2108 16th, n. w.
Johnson, Louis Alward,	200 8th, s. w.
Johnson, Paul Bowen Alden,	3208 17th, n. w.
Johnson, Stuart C.,	5214 14th, n. w.
Jones, Edward Barton,	The Rochambeau.
Jung, Franz August Richard,	1229 Connecticut av., n. w.
Jung, Sofie Amalie Nordhoff,	1229 Connecticut av., n. w.
Junghans, John Henry, <i>A. M.,</i>	417 D, n. e.
Kane, Howard Francis,	1624 I, n. w.
Karpeles, Kate B. Bogle,	1207 Columbia Road, n. w.
Karpeles, Simon Rufus,	1207 Columbia Road, n. w.
Kaufman, Harry Marx,	The Burlington.
Kaveney, Joseph J.,	The Elkton.
Kearney, Henry W.,	1229 O, n. w.
Kebler, Lyman Frederick,	1322 Park Road.
Kelley, John Thomas, Jr.,	1312 15th, n. w.
Kemble, Adam, <i>Phar. D.,</i>	The Cecil.
Kempf, Helen D. Clarke,	Govt. Hosp. Insane.
Kerr, Henry Hyland, <i>C. M.,</i>	1742 N, n. w.
Key, Sothoron, <i>M. S.,</i>	1716 H, n. w.
Keyser, Carl Schurz,	1218 19th, n. w.
Kilroy, James J.,	103 I, n. w.
Kimball, Arthur Herbert, <i>B. S., A. M.,</i>	The Farragut.
Kober, George Martin, <i>LL. D.,</i>	1819 Q, n. w.
Koonos, Charles Kneller,	20 Iowa Circle.
Kress, Lauretta E.,	1713 I, n. w.
Ladd, John Morris,	321 East Capitol.
Lamb, Daniel Smith, <i>A. M., LL. D.,</i>	2114 18th, n. w.
Lamb, Isabel Haslup,	2114 18th, n. w.
Lamb, Robert Scott,	Stoneleigh Court.
Larkin, P. Edward,	The Montana.
Lawson, Huron Willis,	1706 R. I. av., n. w.
Le Comte, Ralph M.,	The Champlain.
Lee, Thomas Sim, <i>A. B.,</i>	1740 18th, n. w.
Leece, Robt. Henry,	G. W. U. Hospital.
Leech, Daniel Olin,	1237 Massachusetts av., n. w.
Leech, Frank,	1359 Columbia Road.
Lehr, Louis Chas., <i>A. B.,</i>	1737 H, n. w.
LeMerle, Eugene Lyman,	2011 Q, n. w.
Lemon, Hanson Thos. Asbury,	1847 Kalorama Road.
Lewis, Duff Green, <i>A. B.,</i>	1311 14th, n. w.
Lewis, Harry S.,	1219 Vermont av., n. w.
Lind, John Edward,	St. Elizabeth Hosp.
Lindsay, Janvier Whitton,	Fontanet Courts.
Lindsey, John Hathaway,	Fall River, Mass.
Linville, Thomas,	2517 14th, n. w.
Little, Arthur Bickle,	6711 5th, n. w.
Little, Joseph W.,	1313 14th, n. w.
Little, Richard Mitchell,	1213 East Capitol.
Littlepage, Wm. Houston,	The Alabama.
Logie, Benjamin Rush,	The Brighton.
Loring, Frank B.,	1420 K, n. w.
Lowe, Thomas Francis,	205 H, n. w.
Luce, Charles Roscoe,	215 2d, s. e.
Luckett, L. Fleet,	1419 Rhode Island av., n. w.

Lyon, Marcus Ward, Jr.,	48 V, n. w.
Lyon, Martha M. Brewer,	48 V, n. w.
McArdle, Thomas Eugene, <i>A. M.</i> ,	The Hamilton.
McCarthy, Joseph J.,	1510 30th, n. w.
McCormick, John Henry,	1006 Selma St., Mobile, Ala.
McCue, Joseph Douglas,	1441 R. I. av., n. w.
Macdonald, A. Magruder,	France.
McKay, James George,	2009 Columbia Road.
McKee, Wm. P.,	1340 Oak, n. w.
McKimmie, Oscar Addison Mack,	The Valois.
McLaughlin, Thomas Notley,	1736 Conn. av., n. w.
McLaughlin, Wm. F.,	103 R. I. av., n. w.
MacNamee, Arthur Munson,	806 O, n. w.
McPherson, Dorsey Mahon,	1810 15th, n. w.
McQuillan, Francis,	314 B, s. e.
Macatee, Henry Cook,	1478 Harvard, n. w.
Machen, Francis Stanislaus,	3206 17th, n. w.
Mackall, Louis,	3044 O, n. w.
Maddox, Albert Sidney.	
Madigan, John J., <i>A. M.</i> ,	2302 Nichols av.
Madigan, Patrick S., <i>A. B.</i> , <i>A. M.</i> ,	2302 Nichols av., s. e.
Magee, George H.,	631 7th, n. e.
Magee, Michael D'Arcy, <i>A. M.</i> ,	1623 Connecticut av., n. w.
Mallan, Thomas Francis,	820 Connecticut av., n. w.
Mallory, Wm. J.,	1720 Connecticut av., n. w.
Malone, Wilson Prestman,	The Farragut.
Mankin, J. Ward,	3311 13th, n. w.
Manning, Wm. J.,	1103 O, n. w.
Marbury, Charles Clagett, <i>A. B.</i> ,	1015 16th, n. w.
Marbury, Wm. Berry,	1830 Jefferson Place.
Marshall, Collins,	2507 Pennsylvania av., n. w.
Martel, Leon A.,	1339 Conn. av., n. w.
Martin, Thos. Chas.,	The Rochambeau.
Martyn, Herbert Edward,	1332 Mass av., n. w.
Mason, Elijah Lumbia,	The Portner.
Mason, Robert French,	The Cordova.
Mason, Wm. Beverly,	1738 M, n. w.
Masterson, Wm. Lincoln,	Stoneleigh Court.
Mazzei, Francis Anthony,	2 T, n. e.
Mead, Theodore,	928 23d, n. w.
Mendelson, Joseph A.,	4012 Georgia av., n. w.
Merrill, Walter Hibbard, <i>B. L.</i> ,	Garfield Hospital.
Mess, Wm. A.,	459 G, n. w.
Metzerott, John Hitz,	1110 F, n. w.
Miller, Gideon Brown, <i>B. Sc.</i> , <i>C. E.</i> ,	1730 K, n. w.
Miller, Harry Willis,	Takoma Park, D. C.
Miller, Maurice Erwin,	1618 H, n. w.
Miner, Francis H.,	1842 16th, n. w.
Mistretta, Ferdinand Henry,	Copley Court.
Mitchell, James Farnandis, <i>A. B.</i> ,	1344 19th, n. w.
Mitchell, Joseph Ernest,	1428 K, n. w.
Moore, Mead,	The Rochambeau.
Moore, Wm. Cabell,	The Wyoming
Moran, John Francis, <i>A. B.</i> ,	2426 Pennsylvania av., n. w.
Morgan, Edwin Lee,	The Plaza.
Morgan, Francis Patterson, <i>A. B.</i>	
Morgan, James Dudley, <i>A. B.</i> ,	919 15th, n. w.
Morgan, Wm. Gerry, <i>A. B.</i> ,	1624 I, n. w.

Morhart, Frederick H.,	1324 9th, n. w.
Morris, George Gideon,	1913 14th, n. w.
Morrison, Edward Lloyd,	1610 I, n. w.
Morse, Edwin Emery,	1706 M, n. w.
Moser, James Madison,	1107 Mass. av., n. w.
Motter, Murray Galt, <i>A. M., B. S.</i> ,	2314 19th, n. w.
Moulden, Wm. Raymond,	Friendship Heights, Md.
Mudd, Thos. D.,	1328 Good Hope Road.
Mulcahy, Daniel Dominick, <i>Phar. D.</i> ,	1216 North Capitol.
Muncaster, Steuart Brown,	907 16th, n. w.
Mundell, Joseph Joshua,	1208 Maple View Place, Anacostia.
Murphy, Joseph Alexander,	1478 Chapin, n. w.
Murphy, Walter C.,	314 E, n. w.
Murray, Thomas Morris,	Abington, Conn.
Neale, Richard Aloysius,	1209 U, n. w.
Neill, Thos. E.,	1824 Mass. av., n. w.
Neuman, Lester,	2901 16th, n. w.
Nevitt, James Ramsay,	1820 Calvert, n. w.
Newell, William Sawyer,	The Champlain.
Newgarden, George J., <i>A. M.</i> ,	Fort Oglethorpe.
Newhouse, Benjamin,	1136 6th, n. w.
Nichols, John Benjamin,	1321 Rhode Island av., n. w.
Norcross, Alfred C.,	819 Taylor, Petworth.
Norris, John Lawson,	5714 13th, n. w.
Norris, Phebe Russell,	The Iowa.
Ober, George Clarke,	125 B, s. e.
O'Donnell, Wm. Francis,	1243 3d, n. w.
O'Donoghue, John Alphonso, <i>A. M.</i> ,	909 16th, n. w.
O'Malley, Mary,	Govt. Hosp. Insane.
Ong, Harry A.,	1768 Columbia Road.
Owen, Wm. Otway,	2719 Ontario Road
Owens, Samuel Logan,	1316 N. H. av., n. w.
Pagan, Albert Elwood,	1624 I, n. w.
Parker, Edward Mason,	1726 M, n. w.
Parker, Henry Pickering, <i>A. B.</i> ,	1728 Connecticut av., n. w.
Parsons, Alfred Vandiver,	Box 44, Takoma Park.
Parsons, Mary Almera,	937 New York av., n. w.
Parsons, Wm. Turner,	926 17th, n. w.
Patten, Wm. Francis,	The Parkwood.
Perkins, Wm. Robert, <i>Phar. D.</i> ,	1332 15th, n. w.
Petteys, Charles Volney,	1211 Clifton, n. w.
Pfender, Chas. A.,	304 Rhode Island av., n. w.
Pickford, Edward Ferguson, <i>A. B.</i> ,	422 8th, s. e.
Pigott, John Burr,	The Burlington.
Pile, Mayne Marshall,	The Portner.
Pole, Samuel Boyce,	216 8th, n. e.
Polkinhorn, Henry Alexander,	1201 M, n. w.
Pool, Benjamin George,	945 Rhode Island av., n. w.
Poole, Thos. A.,	816 15th, n. w.
Portman, Adeline Elwell, <i>A. M.</i> ,	Chevy Chase, Md.
Potter, James Albert,	300 2d, s. e.
Prentiss, Daniel Webster, <i>B. S.</i> ,	1213 M, n. w.
Price, Harry M.,	1315 R. I. av., n. w.
Price, Malvern Hill,	5th and H, n. e.
Prosperi, Milton Hickox,	216 8th, s. e.
Pyles, Richard A.,	2015 Nichols av., Anacostia.
Ragan, Chas. A.,	1801 16th, n. w.
Randolph, Buckner Magill,	The Toronto

- Ransdell, Robert Cathcart, U. S. N., Navy Dept.
 Ray, Anthony Moreland, 4800 Wisconsin av., n. w.
 Read, Boyd Richard, 123 R. I. av., n. e.
 Ready, F. J., 3301 N, n. w.
 Reede, Edward Hiram, The Rochambeau.
 Reeve, Jesse Newman, 1518 28th, n. w.
 Reeves, William Pinkney, The Congressional.
 Reichelderfer, Luther Halsey, 1447 Belmont, n. w.
 Reisinger, Emory Wm.,
 Rench, Victor B., 1300 Rhode Island av., n. w.
 Repetti, Fred, 811 L, n. w.
 Repetti, John Joseph, 404 Seward Square
 Rice, Eugene Clarence, Jr., 4832 16th, n. w.
 Richards, Alfred, The Seward.
 Richardson, Charles Williamson, 1317 Conn. av., n. w.
 Richardson, Edward Elliott, *M. S., Ph. D.*, 1001 Alabama av., s. e.
 Richardson, James Julius, 1509 16th, n. w.
 Richey, Stephen Olin, 732 17th, n. w.
 Riggles, John Lewis, The Champlain.
 Rives, Wm. C., 1702 Rhode Island av., n. w.
 Robins, William Littleton, The Rochambeau.
 Rogers, Joseph Decatur, 1400 M, n. w.
 Roman, Frederick Ogle, 1918 17th, n. w.
 Rossiter, Thos. J., 820 D, s. e.
 Roy, Philip Seddon, 1200 Massachusetts av., n. w.
 Ruedy, Robert Conrad, 621 Maryland av., n. e.
 Ruffin, George Mendenhall, The Parkwood.
 Ruffin, Sterling, 1335 Conn. av., n. w.
 Rule, Amy Jean, The Kensington.
 Russell, Murray A., 1440 R. I. av., n. w.
 Sacks, Samuel M., 1000 N, n. w.
 Samson, George C., 2423 Pennsylvania av., n. w.
 Saunders, Chas. Haddon, 311 Ft. Worth Club Bldg., Fort Worth, Texas.
 Savage, Linnaeus Samuel, 623 Maryland av., n. e.
 Sawtelle, Henry Fenno, 3001 11th, n. w.
 Schneider, Elwin C., 1742 U, n. w.
 Schreiber, Henry R., 502 H, n. e.
 Scott, James Foster, *A. B.*, McLean, Va.
 Seibert, Edward Grant, *Phar. G.*, 1545 I, n. w.
 Selby, John Hunter, 1206 18th, n. w.
 Sessford, Joseph S. F., 1738 F, n. w.
 Shands, Aurelius Rives, 901 16th, n. w.
 Shaw, John Watson, 1453 Rhode Island av., n. w.
 Shoup, Jesse, The Roland
 Shute, Daniel Kerfoot, *A. B.*, 1719 De Sales, n. w.
 Sillers, Robert Fry, 313 H, n. w.
 Silvester, Richard Lee, The Farragut.
 Simpson, Chas. August, 1219 Connecticut av., n. w.
 Simpson, John Crayke, 1421 Massachusetts av., n. w.
 Skinner, John O., The Portner.
 Sloat, Jesse Irving, Adj. Gen. Office.
 Smart, Benjamin Horace, 227 Rhode Island av., n. w.
 Smith, David Oscar, 1736 Columbia Road.
 Smith, Percy G., 1489 Newton, n. w.
 Snowden, Edgar, 1900 S, n. w.
 Snyder, Arthur Augustine, 1126 16th, n. w.

Sohon, Elizabeth,	512 I, n. w.
Sohon, Frederick,	512 I, n. w.
Sorrel, George Reuben,	616 F, s. w.
Sothoron, Elmer Hezekiah, <i>B. E.</i> ,	1921 I, n. w.
Sowers, Wm. F. M.,	1707 Mass. av., n. w.
Sparks, Wm. Clark,	The Farragut.
Spire, Richard Lee,	1927 North Capitol.
Sprigg, William Mercer,	The Rochambeau.
St. Clair, Francis Alphonzo, <i>Phar. D.</i> ,	1319 T, n. w.
Stanley, A. Camp,	The Farragut.
Stanton, Wm. Joseph,	3323 O, n. w.
Staples, Aubrey Horatio,	1739 S, n. w.
Stavely, Albert Livingston, <i>A. M.</i> ,	1744 M, n. w.
Stephenson, Eugene Theodore,	653 Maryland av., n. e.
Stewart, John W.,	1202 K, n. w.
Stewart, Margaret Ross,	1713 I, n. w.
Stone, Isaac Scott,	Stoneleigh Court.
Stoutenburgh, John Albertson,	116 2d, s. e.
Strobel, Mary Louise,	16 R, n. w.
Stromberger, Henry Holliday,	135 Florida av., n. w.
Stuart, Albert Rhett, <i>A. M.</i> ,	1638 Conn. av., n. w.
Stuart, Daniel D. V., Jr.,	1734 Conn. av., n. w.
Stuart, James, <i>A. B.</i> ,	1315 12th, n. w.
Suddarth, James Littleton,	609 M, n. w.
Sullivan, Robt. Young,	The Burlington.
Suter, Henderson,	3026 N, n. w.
Swain, Oliver A. T.,	West Lynn, Mass.
Syme, Wm. Henry,	1316 Euclid, n. w.
Talbott, John Allan,	1869 Wyoming av., n. w.
Tastet, David W.,	2907 14th, n. w.
Taylor-Jones, Louise, <i>M. S.</i> ,	The Rochambeau.
Taylor, Eugene Arthur,	The Manchester.
Taylor, Lewis Harvie,	The Cecil.
Tewksbury, W. D.,	4107 14th, n. w.
Thomas, Ada Rebecca,	The Thomas.
Thomas, John Daniel, <i>A. B.</i> ,	The Farragut.
Thomas, Wm. J. G.,	2905 14th, n. w.
Thompson, Edgar Dorman, <i>A. M.</i> ,	417 Quincy, n. w.
Thompson, J. Lawn,	1404 M, n. w.
Thompson, Millard Filmore, <i>D. D. S.</i> ,	484 Md. av., s. w.
Thönssen, Wm. Julius Reichmann,	315 C, s. e.
Tibbets, Albert Perkins,	The Laclede.
Titus, Elijah White,	The Rochambeau.
Tobias, Henry Wood, <i>B. E.</i> ,	1339 Columbia Road, n. w.
Tobin, Richard F.,	122 11th, s. e.
Trimble, Robert S.,	722 18th, n. w.
Tubman, James Richard,	1750 Park Road, n. w.
Upham, Wm. Clarence,	128 Maryland av., s. w.
Vale, Frank Palmer,	208 Southern Building.
Valentine, Aloysius W.,	610 North Carolina av., s. e.
Van Rensselaer, John, <i>A. M.</i> ,	The Rochambeau.
Vaughan, George Tully,	1718 I, n. w.
Verbrycke, J. Russell, Jr.,	The Rochambeau.
Vincent, Thomas Norris, <i>A. M.</i> ,	The Mansfield.
Walker, Reginald Redford,	The Rochambeau.
Wall, Joseph Stiles,	2017 Columbia Road.
Walsh, John Edgar,	202 East Capitol.

Walter, William Francis, <i>A. M.</i> ,	487 H, s. w.
Warden, Horace Fred William,	The Farragut.
Warren, George Walter,	1212 H, n. e.
Waters, Charles L.,	1414 Q, n. w.
Watkins, Edgar Wm.,	1373 Columbia Road, n. w.
Watkins, Samuel Evans,	1115 O, N. W.
Watson, James Allen,	2101 Nichols av., Anacostia
Weaver, Clarence Arlington,	1614 Q, n. w.
Webb, Newton E.,	1314 East Capitol.
Webb, Walter Duvall,	New York City.
Wellington, John Ryder, <i>A. M.</i> ,	1712 Lanier Pl, n. w.
Wells, Walter Augustine,	The Rochambeau.
Werber, Gustavus, <i>A. M.</i> ,	1333 Q, n. w.
West, Richard Thomas, <i>Ph. B.</i> ,	2519 14th, n. w.
Wetmore, Wm. Olendorf,	1425 U, n. w.
Wharton, John James,	2011 16th, n. w.
Wheatley, Charles,	The Montana.
White, Charles Stanley,	911 16th, n. w.
White, Davenport,	Stoneleigh Court.
Whitson, Wm. E.,	929 M, n. w.
Wilkinson, Oscar,	1408 L, n. w.
Williams, Geoffrey,	
Williams, Tom A.,	1621 Conn. av., n. w.
Willson, Prentiss,	1732 Conn. av., n. w.
Wilmer, William Holland,	1610 I, n. w.
Wilson, Anita Alvira,	
Wolfe, James Thruston.	Southbrook Courts.
Wood, George Wm.,	2906 P, n. w.
Wood, Wm. Pleasant,	329 East Capitol.
Woodward, Wm. Creighton, <i>LL. M.</i> ,	Boston, Mass.
Wynkoop, James Cartwright,	1824 Lamont, n. w.
Yarnall, John Hepburn,	3028 P, n. w.
Yarrow, Henry Crecy,	814 17th, n. w.
Yates, Frederick, <i>LL. M.</i> ,	1230 9th, n. w.
Young, Clifton E.,	Frederick, Md.
Young, Wm. Glenn,	1523 L, n. w.
Zinkham, Arthur Morris,	Wardman Courts.

HONORARY MEMBERS.

1916—Blue, Rupert,	Supt. Public Health Service.
1916—Braisted, Wm. C., Admiral,	Surg. Gen'l., U. S. Navy.
1915—Gorgas, Wm. Crawford,	Surg. Gen., U. S. A., Retired.
1900—Jacobi, Abraham,	19 East 47th, New York City.
1905—Keen, W. W.,	1719 Chestnut, Philadelphia, Pa.
1895—Osler, William,	Oxford, England.
1895—Palmer, W. H.,	274 Broad st., Providence, R. I.
1895—Shattuck, Frederick C.,	135 Marlboro, Boston, Mass.

ASSOCIATE MEMBERS.

Alsberg, Carl L.,	Bureau Chemistry, Dept. Agricult.
Bloedorn, Walter A., U. S. Navy,	Navy Yard.
Brooke, Roger, U. S. A.,	1106 Conn. av., n. w.
Bullard, Ernest Luther,	Rockville, Md.
Chapman, Ross McClure,	
Conrad, T. K.,	Chevy Chase, Md.
Cook, Richard Lloyd, U. S. A.,	France.

- Fadeley, George B., 181 Falls Church, Va.
 Fauntleroy, Archibald M.,
 U. S. Navy, Naval Hospital, Yokohama, Japan.
 Grayson, Cary T., U. S. Navy, Naval Dispensary.
 Griffith, W. Allen, Berwyn, Md.
 Hammond, Thos. Victor, 1713 H, n. w.
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